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ABSTRACT

Child Care Dallas planned and implemented a project aiming to produce an employer-assisted family day care system which would meet the developmental needs of infants and toddlers, increase the community supply of infant/toddler care, be affordable for parents and employers, demonstrate effective methods for recruiting and training competent caregivers, and organize project experiences into a guide for others to use. Specific objectives of the project were to demonstrate how a home-based system could be developed to serve corporate employees, to test its cost effectiveness, to develop effective methods for recruiting and training competent caregivers, and to disseminate project experiences in a guide to program replication. This summary report provides a brief introduction; a statement of the project's underlying concept; a description of corporate participation; an overview of the system design; and brief descriptions of caregiver requirements, recruitment, selection, and training, of enrollment of participating families, and of the program for children. Outcomes and costs, and the dissemination of information are also described. Conclusions and recommendations are offered. Appendices provide related material, including a child care questionnaire, publicity materials and examples of press coverage, evaluation and assessment forms, a child development training course description, a list of caregiver competencies, and a parent interview form for developing a profile of child behavior. (RH)

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An Employer-Assisted Home Based Child Care Delivery System

Summary Report

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AN EMPLOYER-ASSISTED HOME BASED CHILD CARE DELIVERY SYSTEM

SUMMARY REPORT

Roberta L. Bergman
Project Director

February, 1987

Grant No. 90CJ50/01
Administration for Children, Youth and Families
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CONTENTS

Figures and Tables iii

Foreword iv

1. Introduction 1
   - A Growing Trend 1
   - Creating New Child Care 2
   - The Need for Infant and Toddler Care 3
   - References 5

2. The Concept 6

3. The Participating Corporations 7
   - Selling the Concept 7
   - Implementing the Program 8
   - Results 10
   - The Barriers 12

4. System Design: An Overview 13
   - Caregiver Selection 15
   - Training Design 16
   - Support for Caregivers and Families 16

5. Caregiver Requirements 18
   - Meeting State and Agency Requirements 18
   - Balancing Need and Availability 19
   - Caregiver Compensation 20

6. Caregiver Recruitment 22
   - Community-Wide Efforts 22
   - Corporate Recruitment 23

7. Caregiver Selection 25
   - Initial Screening 25
   - The Home Study 26
   - Caregiver Characteristics 27

8. Caregiver Training 28
   - Informal and Formal Training 29
   - Televised Training 29
   - Effects of Training 31

9. Enrollment of Families 32
   - Enrollment Process 32
   - Enrollment Results 34
   - Parental Ambivalence 35
   - What Was Learned 36

10. Children's Program 41
Day to Day Planning 41
Special Needs 42

11. Project Outcomes 43
Benefits to Corporations 43
Employee Satisfaction 44
End Results 46

12. Project Costs 47
Cost Analysis 47
Cost Effectiveness 49

13. Dissemination of Project Information 51
Personal Contacts 51
Presentations & Exhibits 52

14. Conclusions and Recommendations 58
Converting Interest Into Action 58
Financial Incentives 59
Broader Efforts 60

Appendices

Family Day Care For Your Child A
Child Care Questionnaire B
Examples of Corporate Communications C-I
Texas Department of Human Resources,
Family Day Home Standard by
Standard Evaluation J
Child Care Dallas Day Home Assessment
Profile Summary K
Outline for Family Day Home Social Study L
"Child Care Effort Looking for Homes" M
"Federal Grant Targets Infants Toddler Care" N
"Child Care Program Needs House Mothers" O
Brookhaven College Child Development,
Training for Child Care Dallas Corporate
Initiative Child Care Program P
Family/Child History Q
Examples of Press Coverage R-Z

FIGURES & TABLES

Figures

1 Family Day Home System Organization Chart

2 Family Day Home System Functional Diagram

3 Enrollment Process Flow Chart

Tables

I Types of Employers Contacted

II Recruitment Methods for Caregiver Applicants

III Recruitment Methods for Caregivers Selected

IV Caregiver Characteristics

V Employees' Enrollment Decisions

VI Enrollment Analysis

VII Parent/Child Information

VIII Description of Employees Who Placed Children in Care

IX Parental Satisfaction with Caregiver

X Parental Comfort with Caregiver

XI Other Parent Satisfaction Questions

XII Project Inquiries

FOREWORD

The Employer-Assisted Home Based Child Care Delivery System project conducted by Child Care Dallas was supported by the Administration for Children, Youth and Families, Office of Human Development Services, U.S. Department of Health and Human Services as part of its Discretionary Funds Program.

The project touched many individuals. For some--corporate executives and members of the media--it helped to raise their awareness of the critical child care issues of our time. For others--parents and family day home caregivers--it forged linkages on behalf of children to ensure that infant and toddler care was the best it could be. For the project staff it demonstrated that a high level of commitment and a tolerance for frustration and ambiguity are as critical to launching a new program as are the skills and knowledge required by the job.

There are many to be thanked for their involvement in the project. This includes the participating corporations, their employees, the faculty of Brookhaven Community College, KERA-TV, and especially the caring and sensitive women who became project caregivers.

Special thanks must be extended to Charles Mindel, Ph.D. of the University of Texas at Arlington for his invaluable assistance in analyzing project data and to Patricia Divine-Hawkins, government project officer, for her encouragement and support.

Finally, the project could not have progressed from concept to reality without the substantial contributions of project manager Diana Range, family day home system manager Martha Metarelis, family day home specialists Sharon Fink, Barbara Harrison and Bonnie Hart, and the Child Care Dallas executive staff--Madeline Mandell, Executive Director; Sonya Bemporad, Executive Program Director; and Mike Reeves, Controller.

Roberta L. Bergman
Project Director
February, 1987

1
Introduction

Child Care Dallas is a United Way affiliate, founded in 1901 to serve low and moderate income families. In 1960, the agency inaugurated a family day home system in the belief that substitute care for babies is best offered by the natural, intimate setting of homes. The system was designed to legitimize and support home-based care as a profession through careful selection of caregivers, on-going training, regular monitoring, and the constant availability of staff support. The system has grown from a handful of homes in the early years to over 50 in operation by 1987. Two caregivers in the Child Care Dallas family day home system have been providers for over twenty years; one has provided care for more than fifteen years; another has been with the system for over ten years; and five have been providing care for more than five years.

The quality of the home-based experience for the children and parents' expressed preference for this type of care for very young children led Child Care Dallas to the conclusion that this would be an appropriate option for employers considering ways in which to meet the child care needs of their work force.

A Growing Trend

Employer support for child care is not new; it dates back to the early 1900's.[1] Following its early beginnings, the single most notable example was the Kaiser Shipbuilding Corporation which provided child care in order to accommodate an urgently needed female work force during World War II. At

the end of the war, Kaiser's center and others like it closed, despite the fact that the labor force participation rate of women with young children would never return to pre-war levels.

It was not until the late 1960's and early 1970's that some corporations prompted by the women's movement, affirmative action programs, and a growing awareness of the importance of the early childhood years, expressed renewed interest in child care. Although a number of employer-assisted child care programs emerged during this period, the majority of them disappeared within a relatively short time, largely for economic reasons, while the massive influx of women into the labor force continued.[2]

Since the late 1970's, there has been a dramatic resurgence of corporate child care initiatives in response to the unprecedented numbers of working mothers and, not incidentally, in response to the human resources needs of the corporations themselves. The demand for qualified, productive workers to meet the requirements of labor-intensive service and high technology industries has provided a powerful impetus for corporate attention to the needs of working parents. As a result, there has been a fourfold increase in just the last four years in the number of employers helping employees with their child care needs.[3]

Creating New Child Care

While the majority of these firms are helping employees find or pay for existing child care rather than creating new child care programs, some 600 are offering direct child care, almost all in on-site centers. A Department

of Labor monograph which lists many of these programs devotes 57 pages of text and 18 pages of appendices to guidelines for establishing center-based employer-assisted programs. Only a short paragraph addresses what is nonetheless the most widely used form of child care: family day care[4].

Family day care as an employer-assisted option historically has been overlooked or dismissed as not practicable, a considerable oversight in view of the fact that family day care by itself accounts for 45% of the child care arrangements of working mothers, while all other major forms of child care make up the remaining 55%.[5] The potential for family day care as part of the corporate child care system has been unfulfilled, largely because such care usually consists of informal arrangements falling outside of the three R's: recognition, regulation, and review. In most communities, "informal" is all but "invisible."

In addition, human resources managers have tended to equate the concept of employer-supported child care with on-site child care centers. The most frequent type of response by employers contacted by project staff was "we thought about providing child care for our employees, but there's no way we can build a center...so we gave up on the idea."

The Need for Infant and Toddler Care

In a society in which mothers of children under the age of three are entering the work force in record numbers while women already in the work force are having babies in order to beat the biological clock, the need to develop quality child care for infants and toddlers assumes some urgency.

This is particularly true in Dallas which is second only to Washington, D.C. in the percentage of women in the work force and in which study after study has documented a critical need for infant and toddler care.[6] Among employees contacting Child Care Dallas' corporate resource and referral service in the last two years, over 60% of the requests have been for children under age three.

The trend is expected to continue. Approximately 80% of working women are of child bearing age; some 90% of them will become pregnant.[7] Dallas, in particular, faces a baby boom as the result of in-migration of heads of household under 35.[8]

Fortunately, employers are becoming more aware of new child care initiatives, including vouchers, flexible spending accounts, and resource and referral. Nonetheless, when the idea of creating new child care spaces to meet employee needs has been considered in the corporate sector, family day care has been a novel notion.

REFERENCES

[1] Dana Friedman, "Child Care in the 80's -- Reaching Out to Business and Labor", Child Care Information Exchange, September, 1980, p. 8.

[2] Welfare Research Incorporated, On-site Day Care: The State-of- the-art and Models Development, 1980, p. 14.

[3] Dana Friedman, "Child Care For Employees' Kids", Harvard Business Review, March-April, 1986, p. 28.

[4] U.S. Department of Labor, Pamphlet 23, Employers and Child Care: Establishing Services Through the Workplace (Washington, D.C.: U.S. Government Printing Office, January, 1981).

[5] U.S. Department of Health & Human Services, Office of Human Development Services, Final Report of the National Day Care Home Study, Volume I, "Family Day Care in the United States: Summary of Findings", (Washington, D.C.: U.S. Government Printing Office, September, 1981), pp. 2-3.

[6] Marshall Kaplan, Gans and Kahn/Peat, Marwick, Mitchell, and Company, July, 1976; Community Council of Greater Dallas and Office of Human Development, City of Dallas, A Guide to Decision-Making in Human Services for Dallas County, Texas, June, 1978; Mayor's Child Care Task Force Report, May, 1984; "Child Care In Dallas", Dallas Morning News, November 17, 1985.

[7] Dana Friedman, "Child Care For Employees' Kids", p. 28.

[8] "Texas' Population Future", Office of the Comptroller, October, 1984.

2
The Concept

The Employer-Assisted Home-Based Child Care Delivery System was developed as a model through which employers could assist their employees in securing quality care for their infants and toddlers in family day homes developed specifically for them. While employer support for child care programs has increased in recent years, home-based child care as an employer option has been generally overlooked despite a number of inherent advantages:

1. the relatively small investment of time and capital needed to make the service operational;

2. the cost effectiveness of home-based care for infants and toddlers over comparable center-based care;

3. the flexibility of a home-based system with regard to sites, hours of service, and capacity;

4. the appropriateness of quality home-based care for infants and toddlers;

5. working parents' preferences for home care of very young children.

The objectives of the project were to demonstrate how a home-based system could be developed to serve corporate employees; to test its cost effectiveness, to develop effective methods for recruiting and training competent caregivers, and to organize these experiences into a guide for others to use. What follows are the results.

3
The Participating Corporations

Selling the Concept

The role of the corporations in the project was to provide access to a family day home system for their employees in which homes would be recruited to meet individual employee needs. Each corporation was, through its participation, obtaining child care spaces for its employees that they could not obtain on their own since there was no other community source of "custom-developed" family day homes.

Although home-based child care was a new idea for the corporate managers who decided to participate in the project, they quickly saw the advantages of the model. For most of them, the primary consideration was the minimum investment of time and capital needed to make the service operational for their employees, especially compared to the development of an on-site center. Second, they were attracted by the fact that the program required no commitment of valuable worksite space. For companies in downtown Dallas, the cost and availability of space for child care was a major issue. Even the one company located on a large tract of land in a suburban area would not consider its own facility.

Another advantage apparent to employers was that, unlike a child care center, the program capacity could be responsive to actual--not projected--demand. The employer could request an allocation of spaces in the family day home system according to the actual numbers of employees needing service.

This number could well vary from year to year, yet the company would not be locked into a fixed capacity program which might be too small one year and too large the next.

The employers also responded favorably to the flexibility of the system with regard to employees' work schedules. The system could adapt not only to meet overtime requirements but also flextime schedules. Employers also understood the benefit of the site flexibility inherent in the system. The employees could choose care near where they work, near where they live, or along their commuting route. Most employees (74%) chose care near where they live, an option that would be precluded by an on-site center.

No less significant in attracting employers was the fact that the home-based system offered care at a lower cost than comparable center-based care.

Implementing the Program

Once a company expressed interest in the project, management convened a meeting for all interested employees and their spouses. The project staff presented the program in as much detail as necessary to answer all the parents' questions--questions which tended to recur across companies (how were caregivers recruited, how was quality care assured, what happened when a caregiver was unable to provide care, what happened when a child was ill, what happened in an emergency?) A hand-out (Appendix A) was distributed

for employees to review. After all their questions were answered, those employees who thought they might be interested in the project were asked to complete a questionnaire (Appendix B) which, among other items, asked if they would use the service. The results of the questionnaire were reported back to each company including verbatim comments by the respondents. The company then decided how many spaces to request.

Six companies, out of eight in which meetings with employees were held, participated in the project. The two who did not participate could not get top management approval, despite the recommendation of the human resources personnel with whom the project staff had direct contact.

The six companies who participated were:

- an insurance company employing about 3,000 -- mostly female clerical workers and claims processors.

- a major daily newspaper with approximately 1,000 employees. With the exception of one father, the parents who enrolled in the program were not part of the editorial staff--a relatively young and highly mobile group. Most of the participants were administrative staff or employees of the classified department.

- an insurance company of about 400 employees.

- an independent oil and gas company, employing 19 people in Dallas. The participation of this company exploded the myth that only large employers can or will assist their employees with child care. It quickly became evident that a small company can be more responsive to the needs of working parents than a large company because the employees are more visible to top management and probably more critical in terms of staffing levels. In addition, decisions regarding

child care are made with relative speed when there is immediate access to the company president.

- a major bank, with a work force of about 3,000.

- the corporate headquarters of a large nationwide retailer with about 1,100 employees at the corporate headquarters site.

The corporations were asked to publicize the program through posters, employee newsletters, information in employment packets, and other means of corporate communication (Appendices C through I). They were asked to agree to consider on-going support of the program after the project ended and were offered the opportunity to subsidize the cost of care during the project period.

Results

The program had its greatest success in terms of employee response and utilization where there was an active advocate inside the company to make sure that all new employees were informed about the program and that current employees were reminded of it from time to time. It had the least success in a company in which the person who had sought out the program and had been instrumental in implementing it within the company changed jobs, and the responsibility for the program fell to an individual who was neither interested in it nor supportive of it. Several employees who inquired about the program through official channels were discouraged by the individual from enrolling; subsequent utilization from that company occurred only as a result of word-of-mouth referrals.

Although the presence of an active advocate was not by itself sufficient (as indicated by a large number of companies in which the human resource staff wished to participate but could not get top management support), it was clearly necessary.

Securing corporate participation was a major challenge. By the end of the project period, there were thirty-one companies who had reviewed the program and had made no decision as to whether to participate. Another sixteen had considered it and decided not to participate, and another seventeen had been contacted and had not responded. Out of the sixteen who decided not to participate, nine specifically stated that they were unwilling to provide financial support at the end of the grant period. A summary of these companies by type is included as Table I.

TABLE I

TYPES OF EMPLOYERS CONTACTED

Industry Group	Number of Employers
Accounting/legal	2
Architecture	1
Banking/finance	9
Brokerage	1
Data processing	3
Education	2
Government	1
Insurance	9
Lodging/food service	3
Manufacturing	9
Media	2
Medical	2
Oil/gas/chemical	10
Retail	2
Transportation	2
Utilities	6
TOTAL	64

The Barriers

Experience in this project indicates that are still many barriers to be overcome before employers can be expected to achieve a significant role in addressing employee child care. Many executives simply did not recognize that child care is a concern for their employees because the need for child care was generally not openly discussed by employees. Even those executives who acknowledged that child care might be a problem for some employees were often unwilling to do anything about it--either because there were relatively too few employees to justify a child care initiative, or too many employees for the company to afford the program. Others expressed concern about equity ("if we do this for employees with young children, those with teenagers will be upset") or liability ("if an employee's child is hurt in child care that we have provided, we could be sued").

While there are many ways to address specific concerns of employer, concerns could be resolved only when they were raised as legitimate questions rather than as barriers to action. There were a number of employers who acknowledged that their concerns could be resolved, yet came to the conclusion: "Our business is business, not child care--that's the employees' problem."

The reluctance of some employers to participate in the project (and the low priority assigned to the decision-making by some employers who were at least interested) proved disappointing. Still, their responses do not diminish the value of the model. In fact, a number of employers expressed interest precisely because it was a unique model. Rather, their reponses demonstrate that commitment to a child care model follows the commitment to child care. That is the area in which change must occur if this model and other employer-assisted alternatives are to be adopted on a wider scale.

4

System Design: An Overview

The design of the Employer-Assisted Home Based Child Care Delivery System was based on the Child Care Dallas family day home system that has been operational for more than 25 years:

> Each home cares for up to four children--with a maximum of two under the age of two. The caregiver's own preschool age children are included in that number.
>
> Each cluster of 10-12 homes is served by a family day home specialist responsible for the development of the homes, the enrollment of the families, the training and monitoring of the caregivers, and the children's program.
>
> A family day home system manager is accountable for all aspects of the system to insure that program and financial goals are met.

The organization chart is shown as Figure 1 and a functional model is shown as Figure 2.

The homes were developed and managed by Child Care Dallas. The caregivers met stipulated standards of care as well as a variety of contractual requirements. The agency enrolled corporate employees, collected child care fees, paid the caregivers according to rates determined by the agency, supplied all the equipment and materials necessary for the care, and monitored the homes.

The development and management of any child care program is a highly specialized endeavor; the home-based child care system required a unique framework in which to manage the functions of a complex, multi-site, multi-

FIGURE 1

FAMILY DAY HOME SYSTEM ORGANIZATION CHART

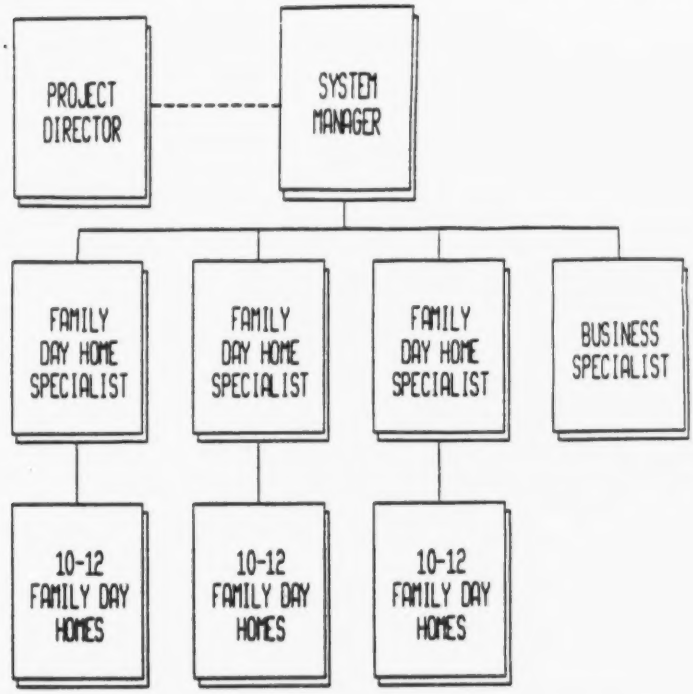


FIGURE 2

FAMILY DAY HOME SYSTEM FUNCTIONS

OBJECTIVE: To provide high quality care for employees of participating corporations through a Family Day Home System

	Project Director	Family Day Home System Manager	Family Day Home Specialist	Family Day Home Caregiver	Corporation	Parent
SECURE CORPORATE PARTICIPATION.....	X					
DISSEMINATE INFORMATION TO EMPLOYEES..	X			X		
CONDUCT EMPLOYEE TRAINING:						
USE OF FAMILY DAY HOME SYSTEM.....	X	X		X		
CHILD DEVELOPMENT ISSUES.....		X	X			
PARENTING ISSUES.....		X	X			
IDENTIFYING NEEDS FOR CARE.....					X	
RECRUIT CAREGIVERS.....		X	X			
ASSESS CAREGIVERS.....			X			
SELECT CAREGIVERS.....			X			
MONITOR CAREGIVERS.....			X			
ENROLL EMPLOYEES.....			X			
CONFER WITH PARENTS.....			X	X		
CONDUCT WORKSITE SEMINARS.....		X		X		
INSURE HIGH QUALITY CHILD CARE.....	X	X	X	X	X	X

dimensional service. Its key components were: careful screening and selection of caregivers, the development of an industry-specific training design, and the availability of on-going professional support for caregivers and families. Each component is described briefly below, and in fuller detail in chapters five, seven, eight and nine.

Caregiver Selection

Family day home caregivers have great latitude in their functioning. They are continually involved in decision-making in their provision of care to children. The care they provide reflects the richness and flavor of their individual personalities, lifestyles and cultures. Because they each work with small numbers of children, they can be immediately responsive to individual children's needs; yet because of their isolation and high degree of autonomy, the family day home system can neither define nor observe exactly how they respond.

In recognition of these attributes, the system was designed to provide sensitive, careful evaluations of an applicant's capacity to provide care. Every effort was made to insure that the selection process included the element of self-selection--that potential caregivers were well aware of the demands and expectations of the role before choosing to pursue it. Each component of the selection procedure was carefully interpreted at the beginning of the process so that applicants who were not selected would not feel minimized or less adequate as parents.

Training Design

The system created a training program in which both the content and the process of delivering the training were specific to home-based child care. The pre-service training involved caregivers immediately as part of the child care team and the caregiving profession. The most intensive component was the individualized in-service training in each day home. Provided by the family day home specialists, this training was directed toward specific areas identified by both the specialist and the caregiver herself.

College credit training was offered as well, in a series of seminars specifically developed for the project and via a telecourse aired three times a week for four weeks.

Support for Caregivers and Families

The immediate goal of the family day home system was to create stable child care arrangements which parents could trust to be available for as long as they were needed. The work of the system staff was to support each family in their parenting role, while supporting and strengthening each caregiver's capacity to develop positive relationships with the parents.

The fact that the parent choosing day home care was choosing the person who would actually care for her child permitted a level of parental choice and control that is rarely possible in center-based care. The choice tended to reflect not only desired caregiving traits but also lifestyle, values, and culture. At the same time, however, the parent who was ambivalent about her

decision to return to work sometimes experienced discomfort in the relationship with the caregiver--a person who had not only chosen to stay home but also who was recognized for her skills in mothering.

The system was designed to provide a context in which staff could relate to both parents and caregivers in ways which nurtured the parent-caregiver relationship. The design required staff to function in a variety of settings--visiting caregivers on a regular basis but at different times of the day and meeting parents at early hours, or in the evening, or for lunch at their worksites, or on week-ends. Staff were not only training and supporting caregivers, they were often training and supporting parents in their new role as child care consumers and as parents.

5
Caregiver Requirements

Meeting State and Agency Requirements

The family day home caregivers were independent contractors, contracted by Child Care Dallas on an exclusive basis. The state regulations under which Child Care Dallas was licensed as a child-placing agency stipulated that caregivers could not care for children other than those placed by the agency itself. Thus, the project could not contract with providers already caring for children on their own. While this had been standard operating procedure for a number of years, it was clearly an obstacle to a new system trying to establish a pool of day home spaces to meet a variety of parental needs. After the project ended, the state of Texas stopped licensing non-adoption child-placing agencies, permitting Child Care Dallas to contract with caregivers who might have their own clientele.

Each caregiver was required to meet state registration standards (Appendix J) and a more rigorous set of standards defined by the agency (Appendix K). Upon meeting these standards, each project applicant was approved as a caregiver only after a detailed home study was conducted by the family day home specialist (see Appendix L). The purpose of this home study was to provide a thorough evaluation of a caregiver applicant's capacity and motivation to provide child care as well as her willingness (and that of her family members) to accept the entry into their home lives of both clients and agency staff.

Balancing Need and Availability

The home study process took approximately eighteen hours of staff time spread over a six to eight week period. It could not be hurried; thus parents who had an urgent need for immediate child care could not be served. This led to one of the most frustrating aspects of the project. Often a parent would enroll a child with the expressed understanding that a home would be developed to meet the parent's specific child care needs. The process of recruitment and home study would begin; a caregiver would be approved and eagerly await placement of clients, only to find that the family(ies) had made other arrangements for care during the approval process.

If there were not other clients awaiting care in the same area, the caregiver often decided to provide care on her own, outside of the project. While this did not help the project meet its objectives, the outcome must be viewed as positive since the community at large gained a cadre of some fifty new family day home caregivers who had been screened, approved and trained by project staff.

The immediate availability of child care spaces would be less of a problem in a maturing system in which openings in existing homes occur by attrition. Indeed, the design of the Child Care Dallas system which limited the number of infants to two in a market in which the heaviest demand was for infant care created built-in shortages during the project period. These shortages could be addressed only as the infants in care reached their second birthday, freeing spaces for younger babies.

Although the capacity to respond to immediate need eventually increases by virtue of increased overall capacity, system size must be balanced by the pressure to fill each available family day home space in order to maximize the earning potential of the caregiver. If her earnings are insufficient, she may drop out of the system--thus decreasing total system capacity. Without some ability to compensate caregivers during the period in which spaces are unfilled, the likelihood of maintaining an inventory of unfilled child care spaces to meet urgent need is small.

Caregiver Compensation

At the beginning of the project (1983), caregivers earned $8.80 per child per enrolled day. This was increased to $9.00 per day during the second year of the project. These costs were covered by parent fees. Payment for enrolled days included days on which children were absent, and caregivers received one week of paid vacation annually. Equipment and supplies (from washcloths to toys to adult size rocking chairs) were furnished by Child Care Dallas; parents provided diapers. The caregivers participated in the USDA Child Care Food Program. Thus a caregiver whose home was enrolled to maximum capacity could earn over $9,300 per year with no out-of-pocket expense, no need to recruit children on her own, no potential loss of revenue from delinquent fees, plus the income tax deductions derived from using a portion of one's home for business.

Although $9,300 cannot be considered generous compensation for the skills and knowledge required of the caregivers, it was generally viewed by them as reasonable supplemental income. Their views undoubtedly reflect both the value placed on caring for children by our society and, in a number of cases, the economic trade-offs some women are willing to make in order to be able to stay at home with their own young children.

6
Caregiver Recruitment

During the project period, 5,116 individuals contacted project staff in response to various recruitment efforts. This number far exceeded expectations, indicating that recruitment efforts targeted to specific populations yield positive results.

Community-Wide Efforts

The project's initial recruitment efforts began with articles in community newspapers located in areas in which the need for child care had been identified by employees of participating corporations. Copies of three articles are included as Appendices M, N, and O. These articles were followed up in certain areas with classified ads in the same papers.

As the project proceeded, classified and small display ads were placed in the "Greensheet", a newspaper solely devoted to advertising and free to the public. It was possible to place ads in editions of this paper serving specific communities, thereby increasing the efficiency of the advertising. It appeared that this type of publication is read by individuals who have the time to go through it, e.g. women at home--the project's primary recruitment source. As one caregiver declared, "I was reading through the Greensheet to find a used bicycle, and I saw your ad." Forty percent of all applicants and forty-four percent of those selected as caregivers were recruited through this method.

In addition to the extensive use of newspaper advertising, specialized efforts were conducted in areas in which initial recruitment efforts had not been successful. In several instances church groups and PTAs were contacted about the project--these efforts yielded only one applicant. A number of pediatricians were asked to post flyers in their offices; the response varied from enthusiastic support to the comment by one doctor, "I don't believe children should be cared for outside the home; your program will just encourage more mothers to go to work."

Corporate Recruitment

The intent to recruit caregivers from within the participating corporations was tempered by the nature of the relationship with the corporations themselves. Most initially maintained somewhat of an arms-length relationship with the program; it was viewed as an employee service akin to the provision of a cafeteria or discounted bus passes--services provided by an outside entity. As such, the corporations' interest in recruiting caregivers from inside the "corporate family" was limited. Two of the companies did contact former employees who had not returned from maternity leaves; one caregiver applicant was recruited by this method. It might be expected that replications of this project initiated by employers themselves rather than potential service providers could result in more corporate involvement in recruitment.

Ten applicants did come from the corporations; this included one employee who applied to become a caregiver, one applicant who was a member of an

employee's family, and eight applicants who had been referred to the project by employees. Two were selected to become caregivers.

Tables II and III shows results of various recruitment methods for 3,384 applicants who lived in the areas in which care was needed and for all those who were selected. The remaining 1,732 applicants who lived in areas in which there were no requests for care were screened out immediately upon contacting the project.

TABLE II

RECRUITMENT METHODS FOR CAREGIVER APPLICANTS

METHOD	PERCENT	NUMBER
Newspaper article	52.6	1780
Greensheet Advertisement	40.5	1371
Newspaper Advertisement	3.9	132
Friend	.8	27
Corporation	.3	10
Physician's Office	.1	4
Radio	.0	1
PTA	.0	1
Not specified	1.6	58

TABLE III

RECRUITMENT METHODS FOR CAREGIVERS SELECTED

METHOD	PERCENT	NUMBER
Greensheet Advertisement	44.1	15
Newspaper article	32.4	11
Newspaper Advertisement	11.8	4
Friend	5.9	2
Corporation	5.9	2

7
Caregiver Selection

A total of thirty four caregivers were selected for the project. They lived within a fifty-mile radius of downtown Dallas in every direction, and resided in nineteen zip codes. An additional sixty caregivers were studied in depth and were counseled out during that process.

Initial Screening

Each applicant who contacted the project was screened by telephone to ascertain her interest and her ability to meet certain basic criteria. Those individuals who lived in areas in which there were no requests nor little likelihood of future requests for care were screened out immediately. The others were asked:

-- do you live in a house or an apartment?

-- if a house, is the yard fenced?

-- if an apartment, is it on the first floor? Are there two entrances?

-- do you have a telephone?

-- how is your residence heated? If by space heaters, are they hot to the touch?

-- how many children of your own do you have? What are their ages?

-- do you currently care for children?

-- can you designate an individual who would provide child care for you as an alternate?

Based upon their answers, they were either screened out or accepted for further consideration. Ninety percent screened themselves out either because they found the project's requirements to be too stringent, or they felt they could earn more income providing care on their own.

The Home Study

Applicants who met the initial screening criteria and expressed serious interest in the project were studied to evaluate their capacity to provide child care. The home study was designed to identify attitudes and competencies considered critical to success as a family day home caregiver. The study included observations of the home as a child care setting as well as detailed interviews with the caregiver applicant. Materials used in the study are included as Appendices K and L.

As noted in Chapter 5, the home study was a lengthy process. Some applicants dropped out during the course of their studies, some were counseled out. The amount of applicant attrition, whether voluntary or involuntary, whether initially or later in the selection process, underscored the on-going need to generate a large volume of applicants to find those special individuals who eventually would be selected...in this case only one out of every hundred and fifty inquiries.

Caregiver Characteristics

The caregivers represented a diverse group, ranging from mothers at home with their own young children to grandmothers. Table IV shows the characteristics of the group.

TABLE IV

CAREGIVER CHARACTERISTICS

DESCRIPTOR	PERCENT	NUMBER
Marital Status		
Single	5.9	2
Married	91.2	31
Separated	2.9	1
Divorced	0	0
Widowed	0	0
Ethnic Group		
White	82.4	28
Black	11.8	4
Hispanic	2.9	1
Asian	2.9	1
American Indian	0	0
Family Income		
Under 10,000	2.9	1
10,001-20,000	38.2	13
20,001-30,000	32.4	11
30,001-40,000	17.6	6
40,001-50,000	2.9	1
50,001-60,000	2.9	1
60,001-Over	0	0
Type of previous child care experiences		
Informal babysitting	67.6	23
Paid child care worker	29.4	10
None	2.9	1
Motivation for providing care		
Could work at home	67.6	23
Enjoy children	11.8	4
Wanted playmates for own children	8.8	3
Needed the money	11.8	4

8
Caregiver Training

The project featured a multi-dimensional approach to the training of the caregivers. These dimensions included:

-- pre-service group training
-- pre-service individual training
-- in-service individual training
-- in-service group training
-- on-campus college credit course at a local community college
-- college credit course delivered at home via television

The pre-service group and individual training was designed to foster a sense of professional identity among the caregivers and to strengthen the skills they brought to the job. Twelve hours of group and individual training were provided before any referrals of children were made. The group training session included the following areas:

-- orientation to Child Care Dallas and the project
-- the role of a family day home provider
-- guidance for young children
-- nutrition and the young child
-- family day care as a small business
-- the parent/provider relationship
-- developmental needs of infants and toddlers
-- observation in a Child Care Dallas family day home, followed by a group discussion

Individual pre-service training was oriented to the start-up of the day home: how to use the equipment and supplies that were provided, how to complete required forms, whom to contact in various circumstances, how to ease the entry of the client family into the home.

Informal and Formal Training

In-service individual training was directed toward identified areas of need, using both the Day Home Assessment Profile (Appendix K) and each caregiver's own subjective assessment of areas for further training. This approach provided training in response to specific objectives rather than broad, overall goals. By bringing the training to the point of service delivery, the gap between theory and practice was bridged in practical ways. A caregiver's daily experience became the foundation for the training, assuring the integration of the training content with day-to-day caregiver/child interactions. The training in the home stressed informal interactions between trainer and trainee as the primary means of building knowledge and skills.

The 30 hours of college instruction provided in year one of the project offered a more traditional approach to training as well as the opportunity to receive college credit. This training, developed by Brookhaven Community College specifically for the project, was composed of four Saturday seminars and 10 hours of directed observation and participation in family day homes other than the caregiver's own. (See Appendix P for the course guide.)

Televised Training

During the second year of the project, college credit training was provided to the caregivers via a televised course aired three times a week over a four week period. The telecourse featured a series of eight videotapes which

had been developed by Brookhaven College under a grant from the Texas Education Agency and a study guide specifically prepared for project caregivers. Each caregiver received three hours of college credit upon completion of the course.

The original intent was to present this course over cable television. At about the same time the project was getting underway, a new cable television franchise had been awarded for the City of Dallas, and there was much interest in community access programming. However, the cable company had some difficulty meeting its schedules and much difficulty in satisfying its customers. As the course was being developed, project staff learned that none of the caregivers had cable tv--either because their neighborhoods had not yet been cabled as originally planned or because they were dissatisfied with the cable service once they had subscribed to it. KERA-TV, the Dallas-Ft. Worth Public Broadcasting System affiliate, donated the time to present the course.

Both the project staff and Brookhaven College were contacted by a number of non-project caregivers in the community (and some parents) who viewed the series and wanted more information. The series stimulated sufficient interest among caregivers in the community that the college intends to broadcast it again. The videotapes themselves, as well as the study guide, are available as new caregivers join the family day home system or for presentation elsewhere.

Effects of Training

Since the mode of formal training offered to caregivers was a function of the time period during which they joined the project (i.e. some caregivers entered after the college course in Year I had been completed), the project staff looked at the effects of different training modes on caregivers. They found little correlation between performance as a caregiver and type of training. There was, however, some indication that the more variety of training that a caregiver participated in, the better her performance as measured by the Day Home Assessment Profile.

9
Enrollment of Families

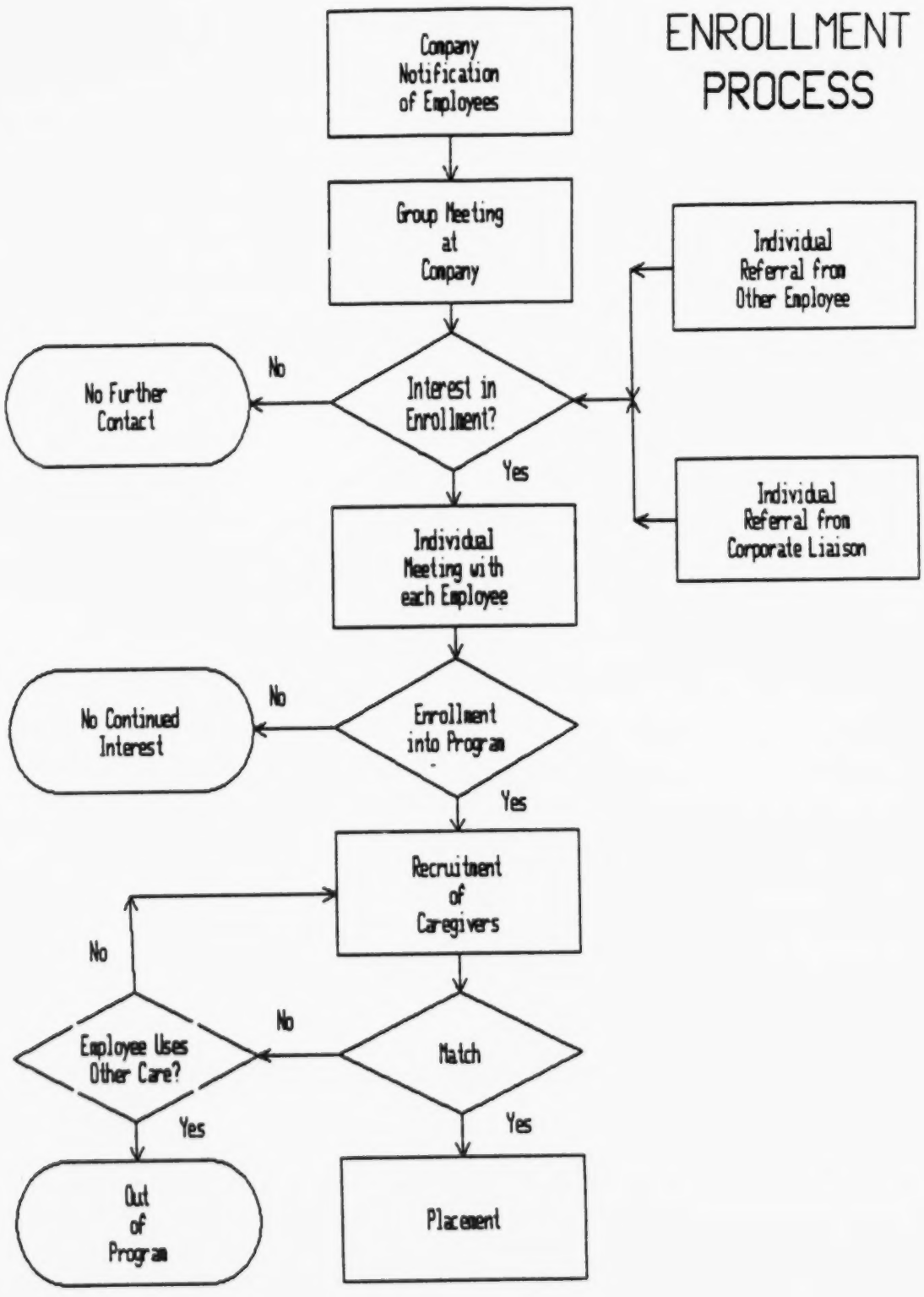
Enrollment Process

Initial enrollment of families began with the group meetings at each corporation described in chapter 3. Those attending included some spouses of employees, employees who were at home on maternity leave and came in for the meetings (some with their babies), and employees who did not yet have children but who were interested in hearing about the program. The meetings held during work hours were generally better attended than meetings held on the employees' lunch hours or after hours.

Employees who indicated interest in the program as a result of these meetings were subsequently contacted by the project staff to arrange individual intake interviews. As the project moved past the start-up phase, enrollment of families occurred through individual contact by employees with the project staff. Forty percent of these contacts were referrals from the project liaison within the company, sixty percent were word-of-mouth referrals from other employees.

Individual intake meetings were often held at the employee's workplace; others were held at the employee's home. The intake process began with a detailed interview in which the employee's needs and expectations for care were explored. Once the program had been fully explained and the family's need defined, the process of matching the family with a caregiver began. A flow chart depicting the enrollment process is shown as Figure 3.

FIGURE 3


ENROLLMENT PROCESS
Company Notification of Employees
Group Meeting at Company
Individual Referral from Other Employee
Interest in Enrollment?
No
No Further Contact
Yes
Individual Referral from Corporate Liaison
Individual Meeting with each Employee
Enrollment into Program
No
No Continued Interest
Yes
Recruitment of Caregivers
No
Match
No
Employee Uses Other Care?
Yes
Yes
Out of Program
Placement

Enrollment Results

One hundred and fifty three employees enrolled in the program; forty eight actually placed their children. Fifty two children were served. As indicated earlier, the project could not easily serve families with an urgent need for care. Sixty percent of those who did not use the service could not because of their immediate need. Further, twenty seven percent of the enrollments occurred for children who had not yet been born. Of these, half did not use the service--either because the family was able to make a child care arrangement on its own by the time the child was born, or the mother decided not to return to work. In several instances, the development of a family day home to serve the family was well underway at the time the family chose not to use the service.

A number of parents enrolled in the program with the intention of using it only if they were unable to find care on their own, or if there was a breakdown of their current arrangements. They viewed the availability of this back-up potential as a positive service provided by their employers. However, it was less positive from the point of view of the project staff since some of these families did not make their intentions known until after they had been referred to homes that had been developed in response to their requests.

Other parents enrolled in the program but, as the process of matching them with caregivers unfolded, expressed expectations for care that were unrealistic or unacceptable to the project. One family wished to specify exactly

the age, sex, and ethnic composition of other children in care in the proposed family day home; other families were adamant that care be provided within very narrowly defined geographic limits.

Parent Ambivalence

For some families, resistance to the choices that were offered seemed to center around the mother's feelings about leaving her child (particularly when this was the first child) rather than the specific expectations for care. For instance, the staff would refer a parent to one or more caregivers, suggesting that the parent make her/his own arrangements for visiting. In some cases, a prolonged period elapsed before the visit was made. In other cases, the parent visited and responded enthusiastically to the caregiver but did not choose to place her child.

This apparent ambivalence became an issue for exploration. Staff found that it was necessary to build a closer working relationship with the parents in order to provide the context in which the ambivalence could be resolved. For example, rather than simply referring families to one or more caregivers, the staff began to go with parents to visit the homes in order to identify the issues which were impacting their decisions. Project staff began to make weekly contact with all parents who were enrolled but not yet using care--whether they had selected a home but were still on maternity leave, or were in the process of selecting a home, or had several months to wait until their babies were born.

These efforts, while perceived by staff as helpful, resulted in only a minor increase in utilization of the service among families who had enrolled. Perhaps these efforts were viewed by the parents as intrusive; clearly they were not effective in dealing with the conflict underlying some mothers' decisions to return to work.

What Was Learned

In retrospect, the following factors seemed to play a part in the overall utilization of the service:

1. Most of the families who enrolled were middle class families who had access to a variety of resources or, at least, knew how to begin to develop their own resources. From their point of view, this program was one of several child care options they could consider, not the only option worth choosing.

2. Anecdotal evidence suggests that those parents who appeared to be most conflicted about the decision to return to work may have found day home care especially difficult to use. Having chosen to return to work, they were confronted with feelings of guilt and doubt, heightened by the daily interface with caregivers who had not only chosen "mothering" as a career, but who also demonstrated considerable skill and comfort in that role.

3. The relationship of the child care professional cast in a new role of "selling" a service and the client cast in a new role of parent/child care consumer often proved demanding for both. Project staff found themselves treated subtly, sometimes overtly as vendors with little recognition by the parents for their professional expertise. They

sometimes encountered parents whose regard for the delivery of child care services equalled their regard for the delivery of the mail.

4. Parents who already had their children in care tended to stay with that arrangement even if they expected it to end momentarily or at some later date. Despite the impact an abrupt change of caregiver might have on their children, the parents opted for the current child care for as long as it would last, rather than considering a planned transition into care offered by the project.

5. Child care available from a caregiver personally known by the parent or referred by someone known by the parent was usually preferred over care offered by the project, even if the known care was unregulated or more costly.

6. Although parents articulated the desire for quality child care and were very specific about the traits they hoped to find in the "ideal" caregiver, "ideal" was more often synonymous with convenience of location rather than the capability or stability of the caregiver.

The experience of the project staff in enrolling families leads to these conclusions:

— As with any other consumer service or product, it is necessary to generate a large volume of prospects in order to make a sale. Not every person who considers using a service will actually use it. While this was puzzling to the project staff since there is a shortage of quality child care for infants and toddlers, it appears to be an immutable law of the marketplace.

— Future replications of the project should include some parent training on the use of the program. Choosing child care was indeed a new experience for most of the participants in the project, and they needed a

more concrete way for them to test their expectations against reality. Perhaps a videotape of an actual family day care home in operation as well as videotaped vignettes of one or more caregivers to whom the family might be referred would have been helpful.

-- As new family day home systems emerge, they must be able to incorporate existing family day homes as well as newly developed homes. If not, a significant resource is lost.

Tables V through VIII show enrollment data.

TABLE V

EMPLOYEES' ENROLLMENT DECISIONS

	PERCENT	NUMBER
Placed in Child Care Dallas program	31.4	48
Found closer private arrangement	18.3	28
Decided to remain with current care	16.3	25
Unable to contact	12.4	19
On waiting list at end of project	11.8	18
Mother stayed home	4.5	7
Family member cared for child	1.9	3
Referred to Headstart or other subsidized program	1.9	3
Moved	1.3	2

TABLE VI

ENROLLMENT ANALYSIS

	MEAN	MINIMUM	MAXIMUM
Number of homes offered	1.25	0	8
Number of days between enrollment and development of day home	36.67	0	310
Number of days between enrollment and employee's decision to place child or choose other care	66.08	0	255

TABLE VII

PARENT/CHILD INFORMATION

	MEAN	MINIMUM	MAXIMUM
Mother's Age	27.2 yrs.	20	38
Father's Age	28.7 yrs.	20	43
Age of child at enrollment (months)	1.6	1	3
Age of child at entry (months)	7.9	0	60 *
Age of child at drop (months)	15.8	2	72
Months in care	4.9	0	16
Time on waiting list (months)	2.6	0	13
Hours in day home per day	10.4 hrs.	5	12

* Sibling of infant in care; attended public kindergarten part day

TABLE VIII

DESCRIPTION OF EMPLOYEES WHO PLACED CHILDREN IN CARE

DESCRIPTOR	PERCENT	NUMBER
Marital Status		
Single	2.1	1
Married	87.5	42
Separated	8.3	4
Not specified	2.1	1
Occupational Category		
Officials and managers	6.3	3
Professionals	47.9	23
Technicians	6.3	3
Salesworkers	2.1	1
Office and clerical	25.0	12
Undefined	12.5	6
Family Income		
under -$10,000	2.1	1
10,001 - 20,000	14.6	7
20,001 - 30,000	22.9	11
30,001 - 40,000	22.9	11
40,001 - 50,000	14.6	7
50,001 - 60,000	10.4	5
60,001 - 70,000	2.1	1
Not specified	10.4	5
Ethnicity		
White	77.1	37
Black	6.3	3
Hispanic	6.3	3
Asian	4.1	2
American Indian	2.1	1
Not Specified	4.1	2
Birth Order of Enrolled Child		
First child	88.7	47
Second child	7.5	4
Third child	1.9	1
Fourth child	1.9	1
Reason for Drop From Project		
Found arrangement on own	15.1	8
Day home closed by Child Care Dallas but family stayed with caregiver	13.2	7
Unhappy with care	9.4	5
Enrolled child in day care center	7.5	4
Mother decided to stay home	7.5	4
Family moved	5.7	3
Day home closed	5.7	3
Parent found less expensive care	5.7	3
Parent left company	1.9	1
Used program for emergency only	1.9	1
Parent lost job	1.9	1
Parent did not pay fee	1.9	1
Stayed in care until end of project	22.6	12

10
Children's Program

The program for the children was highly individualized to reflect the uniqueness of each caregiver and each child.

When an employee enrolled in the program, the family day home specialist completed an extensive child and family history (Appendix Q). The information in the history formed the foundation of all of the work with the child. The child was also observed in the family day home by the family day home specialist at least every two weeks, and the Humanics National Child Assessment Form Ages 0-3 (Marsha Kaufman, Ph.D. and T. Thomas McMurrain, Ph.D., Humanics Limited) was completed every six months.

These observations and assessments were shared with the parents, focusing on each area of the child's development with activities designed to help the child progress to the next level. The parent was helped to recognize the unique traits and needs of her child and how to work with the child on developemental tasks at home. Both the family day home specialist and the caregiver were always available as resources for parents.

Day to Day Planning

The observations and assessments were also used by the family day home specialist and caregiver to do weekly individual planning for the children. Because of the nature of family day home care and the small group size, there were no formal lesson plans. Instead, the daily schedule was planned to be

broad enough to provide individual interaction between the caregiver and each child based on the child's developmental needs. Family day home specialists and caregivers focused on informal learning opportunities specific to the home setting, but augmented by the materials and equipment provided by the project.

In general, the activities were very much the same sorts of activities that a parent would provide if she were at home. These included experiences with manipulative materials, dramatic play, music, stories, art, and outdoor play. The caregivers were encouraged to take the children on short excursions such as walks in the neighborhood or trips to the park.

Special Needs

In addition to providing the basis for routine planning for each child, the observations and assessments of the children enabled staff to determine if a child or family was experiencing some difficulty. In the course of the project, staff identified one infant with potentially serious neurological deficits and two families with some significant parenting problems. The project staff met to review each situation and develop an appropriate intervention plan. These staffings included other Child Care Dallas staff or outside resource people as required. In each case, this interdisciplinary approach proved useful in helping the families.

11
Project Outcomes

The intent of the project was to measure specific outcomes for project participants--the corporations, their employees, the employees' children, and the women who cared for them. Because of difficulties in securing comparative data for non-project participants, the outcomes are primarily descriptive.

Benefits to Corporations

Data on outcomes for corporations were particularly hard to come by. Participating corporations were asked to provide data on absenteeism, turnover and productivity. The project staff stipulated that direct access to employee records was not necessary. Instead, the corporation was asked to report comparisons between employees enrolled in the family day home system and a group of non-enrolled employees with children the same age as the project participants' children. The project staff found that the employers were reluctant to report <u>any</u> information, most claiming that they did not track absenteeism or reasons for turnover. Virtually all said that they did not measure productivity.

One employer did provide absenteeism data on eleven employees. Although the number is too small to be valid, it appears that within the project period, the female employees participating in the project had 10% fewer hours of absenteeism than a group of female employees with children the same age who had enrolled in the project but had not placed their children in care.

Compared to their use of other child care prior to participation in the project, participants experienced 56% fewer absent hours during the project.

Staff speculated about the project's effects on turnover based on a study of employees who enrolled in the project but who did not place their children in care. Forty-one percent of that group left the companies for which they were working at the time they enrolled, compared to four percent of the families whose children were placed in care. That four percent turnover includes one parent who left one of the participating companies to take a position at another of the participating companies.

Employee Satisfaction

The study of employees who did not place their children in the project day homes provided some interesting insights. Although these individuals chose other care for their children, 94% said they would recommend the project to other employees. Those who said they would not recommend it felt they did not have enough information (i.e. first-hand experience) to do so. Most (60%) chose care from a friend or relative or a caregiver recommended by a friend or relative. However, 26% said they would have been more likely to use the program had their employers subsidized the care, thus reducing the cost to the employee.

Thirty families who placed their children in care responded to a telephone satisfaction survey. The results, shown in the following tables, indicate general support both for the project concept and the care that was delivered.

TABLE IX

"HOW SATISFIED WERE YOU WITH THE WOMAN WHO CARED FOR YOUR CHILD?"

LEVEL OF SATISFACTION	PERCENT	NUMBER
Very Satisfied	63.3	19
Satisfied	13.3	4
Not Sure	0	0
Dissatisfied	13.3	4
Very dissatisfied	10.0	3

TABLE X

"HOW COMFORTABLE DID YOU FEEL WITH THE WOMAN WHO CARED FOR YOUR CHILD?"

LEVEL OF COMFORT	PERCENT	NUMBER
Very comfortable	56.7	17
Comfortable	16.7	5
Neutral	10.0	3
Uncomfortable	10.0	3
Very uncomfortable	6.7	2

TABLE XI

OTHER PARENT SATISFACTION QUESTIONS

QUESTIONS	YES		NO	
	PERCENT	NUMBER	PERCENT	NUMBER
Was agency based day-home system a good way to provide this kind of care?	85.7	24	14.3	4
If yes to above, do you think it should be offered by more employers?	95.8	23	4.2	1
Did you choose Child Care Dallas specifically because it cost $49/week?	16.7	5	83.3	25
Did you choose Child Care Dallas specifically because it offered the most convenient care available at the time?	66.7	20	33.3	10
Did you feel that your child's needs were met by the program?	66.7	20	33.3	10

However, remarks by 20 of the 22 individuals who added comments were negative--including specific criticisms of caregivers or project staff, dissatisfaction with the cost of the program, and unhappiness with policies and procedures.

End Results

Perhaps the most significant outcome of the project was that only one of the six participating corporations continued with the program at the end of the project period. For the others, if utilization by employees had been relatively high, the cost of continued participation was a deterrent. If employee utilization had been relatively low, the program was seen as not worth continuing, even if employees' children were still in care.

All families were informed at enrollment that the project had an ending point at which time their employers would be asked to subsidize the program. As the end of the project period neared and employers declined to participate financially, most of the families enrolled or awaiting placement began to make other arrangements. A few decided to continue in the program and pay the full cost themselves.

By the end of the project period, only one employee of the company which agreed to continue remained in the program. The company offered to pay the full share of what had been funded by the grant for that employee but would not add any others to the program, even though there were several on the waiting list.

12
Project Costs

Cost Analysis

The total net outlay for the project was $293,768 over a two year period as follows:

Grant-related cost dissemination, project management, travel, etc.	$ 22, 453
Program development costs day home system design, corporate recruitment, etc.	48,712
Day home development costs recruitment and selection of caregivers	77,104
Day home start-up costs equipment and supplies	23,147
System operating costs payments to providers, system management, etc.	135,824
Indirect	40,283
Income credit (parent fees)	(53,755)

Sixty-five percent of the cost was for personnel--$173,676 in staff salaries, payroll taxes and benefits plus $49,127 in payments to day home providers.

The percentages of direct cost attributable to the major task areas (exclusive of grant-related costs) are as follows:

program development	20.7%
day home development	32.7%
day home start-up	9.8%
system operations	36.8%
	100%

As shown on this percentage breakdown, almost two thirds of the project cost was front-end expense--costs which accrued to each child care space before a child arrived for care. For example:

Day home development (recruitment and selection of caregivers)

Cost per child care space	$ 749.05
Cost per home studied	928.51
Cost per home selected	2,621.58

Day home start-up (equipment and supplies)

Cost per child care space	$ 224.86
Cost per home selected	787.04

Program development (system design and recruitment of corporations)

Cost per child care space	$ 473.32
Cost per employee enrolled	368.07
Cost per employee served	1,173.21

It should be noted that as a day home system grows beyond the development stage, the operating cost will become a greater percentage of the total cost, while the development cost will decrease as a percent of the total. However, the development cost must be covered in the same way that typical capital costs for a new child care facility (architectural fees, construction costs, equipment expenses, etc.) must be covered. While the capital cost of a day home system remains less than the capital cost of a center, the cost is nonetheless significant. Future replications of this project need to consider these costs and plan to meet them.

Cost Effectiveness

Project staff undertook a limited cost-effectiveness comparison of the family day home system and a center-based child care program serving corporate employees. As with the effort to secure outcome data from participating corporations, it was again somewhat difficult to secure meaningful cost information from an outside organization. However, this particular center was chosen because it staffs at the project ratio of one adult to four children, it is generally recognized as providing quality child care, and the corporation had considered family day homes but had opted for center-based care for infants. The center director offered to provide what budget information she could without compromising information the corporation considers proprietary.

The format of the comparison was based on developmental assessments of a group of infants in the project and a group of infants in the corporate child care center. Eleven project children and ten child care center children were matched on age, length in care, and age at entry into their respective child care programs. Using the Humanics National Child Assessment Form Ages 0-3 (Kaufman and McMurrain), each child was assessed on social-emotional, cognitive, language, gross motor and fine motor development. The assessments were performed by their caregivers who had been trained on the assessment process by Child Care Dallas staff. In general, no significant differences were found between the groups.

Given the same general outcomes for the children, it was interesting to compare budgeted costs per child but impossible to make an "apples to apples" comparison. It is not clear from the cost per child analysis supplied by the

center director if certain costs (i.e. occupancy, indirect) are included. They are not specifically identified. Also, the budget is for the entire center, including older children. Still, the comparison suggests that the day home system was more cost effective in terms of outcomes for children. Without data from the center on capital costs, utilization and outcomes for employees, a more comprehensive comparison could not be made.

Corporate child care center

budgeted cost per child per day net of caregiver cost	$10.60
budgeted cost per child per day for caregiver	8.51
budgeted total cost per child per day	$19.11

Project family day home system

budgeted cost per child per day net of caregiver cost	$ 5.19
budgeted cost per child per day for caregiver	9.00
budgeted total cost per child per day	$14.19

13
Dissemination of Project Information

The project staff received nearly seventy inquiries on the project from employers, social service agencies, news media, trade publications, and individuals across the country. Many of the inquiries asked detailed questions about program design, costs, caregiver recruitment; other inquiries were more general. Each was responded to by mail, with several responses generating requests for follow-up information.

A number of these inquiries followed the mailing of a brochure describing the project to 211 major corporations selected from the Fortune 500 and Standard and Poor's Register. Other inquiries resulted from articles about the project in publications as diverse as New Orleans magazine and the National Association of Social Worker News. Copies of all articles are included as Appendices R through Z.

Personal Contacts

The project was visited by the Director of Employee Relations and Services of a major employer in Kansas City and by the Senior EEO Administrator at a large manufacturing firm in Schaumberg, Illinois. Following the visit by the Kansas City employer and at his suggestion, the Executive Director of a Kansas City family service agency and the Director of Planning and Research for the Kansas City United Way visited.

In addition to the those visits, the project was also visited by the Manager of Corporate Child Care Resources, Catalyst (New York), a representative of the U.S. Office of Management and Budget (Washington), Dr. Alfred Kahn, Columbia University School of Social Work; and a graduate fellow at Brandeis University.

The Project Director and Project Manager provided two days of consultation to an employer in Toledo, Ohio to assist that organization in considering the family day home model. As part of the consultation, the two project staff met with the Executive Director of the local community planning agency, the Executive Director of a local child care agency and representatives of a local college training family day home providers.

Presentations and Exhibits

Presentations were made by project staff at the National Association for the Education of Young Children Annual Conference, the Texas Association for the Education of Young Children Annual Conference, and the Dallas/Fort Worth Chapter of the Coalition of Labor Union Women. The Project Director and the Manager of Employee Services of a participating corporation testified on the project at a hearing of the House Select Committee on Children, Youth and Families.

Exhibits on the project were presented at the North Texas Personnel Association Conference and at the American Society for Personnel Administration

National Conference. Approximately 130 human resources personnel representing employers across the country visited the latter exhibit to meet with project staff. Information on the project was also disseminated via six radio interviews and five television programs including a documentary on child care.

The various dissemination efforts confirmed the project staff's findings in meeting one-on-one with local corporations: most of the interest in employer-supported child care across the country is still in the latency stage. Employers wanted to know more about the subject in general; some had thought far enough about it to the point of having some specific questions to ask. It is too soon to know how many, if any, will use what they learned to help their employees meet their child care needs.

A list of those with whom the project director had contact follows as Table XII.

TABLE XII

PROJECT INQUIRIES

TYPE OF ORGANIZATION	CITY/STATE	TYPE OF INQUIRY
social service provider	Birmingham, Alabama	general information
social service provider	Gardena, California	general
social service provider	Hayward, California	funding, budget, program and design
employer - corporate	Los Angeles, California	agency function, funding, corporate utilization
employer - corporate	Los Angeles, California	general information
public school system	Modesto, California	general
employer - corporate	Oakville, California	general information
employer - corporate	Pasadena, California	general information
employer - corporate	Stamford, Connecticut	general information
child therapist	Wilmington, Delaware	general information
employer - corporate	Wilmington, Delaware	costs, program design
County government	Miami, Florida	general information
employer - corporate	Tampa, Florida	general information
social service provider	Atlanta, Georgia	general information
personnel magazine	Chicago, Illinois	general information for article
publisher	Chicago, Illinois	general information
employer - corporate	Peoria, Illinois	general information

TYPE OF ORGANIZATION	CITY/STATE	TYPE OF INQUIRY
employer - corporate	Schaumburg, Illinois	general information, visit
employer - corporate	Sycamore, Illinois	general information
publisher	Urbana, Illinois	request for paper
employer - corporate	Fort Wayne, Indianna	general information
employer - city government	Louisville, Kentucky	general information
employer - corporate	New Orleans, Louisiana	general information
professional association	Silver Spring, Maryland	story for newspaper
media	Boston, Massachusetts	possible story
educational institution	Boston, Massachusetts	general information
employer - corporate	Grand Rapids, Michigan	assessment, general information
employer - corporate	Kansas City, Missouri	general information, visit
employer - corporate	Kansas City, Missouri	general information
social service provider	Kansas City, Missouri	general (visit)
social service provider	St. Louis, Missouri	general information
employer - corporate	St. Louis, Missouri	general information
state government	Jersey City, New Jersey	general
social service provider	Upper Montclair, New Jersey	general
consultant	New York, New York	general
employer - corporate	New York, New York	general information

TYPE OF ORGANIZATION	CITY/STATE	TYPE OF INQUIRY
individual	New York, New York	funding
media	New York, New York	general information
social service provider	Binghamton, New York	general information, follow-up
television network news	New York, New York	general information
corporate resource center	New York, New York	visit
employer - corporate	White Plains, New York	general information
employer - corporate	Cincinnati, Ohio	general information
child care center	Cincinnati, Ohio	assessment, training, quality funding
social service provider	Cleveland, Ohio	day home recruitment training, and pay
social service provider	Cleveland, Ohio	general
employer - corporate	Columbus, Ohio	general information
individual	Kent, Ohio	general information
employer - corporate	Toledo, Ohio	consultation request
individual	Edmond, Oklahoma	general information
social service agency	Lancaster, Pennsylvania	general information
Federal government	Philadelphia, Pennsylvania	general information
employer - corporate	Philadelphia, Pennsylvania	general information(on-site care)
social service provider	Philadelphia, Pennsylvania	general information

TYPE OF ORGANIZATION	CITY/STATE	TYPE OF INQUIRY
social service provider	Philadelphia, Pennsylvania	design, staffing, budget publicity recruitment
media	Austin, Texas	general information for article
social service provider	Austin, Texas	general information
State government	Austin, Texas	general
individual	Dallas, Texas	general information
media	Dallas, Texas	general information for article
employer - city government	Denton, Texas	general information, visit
social service provider	Fort Worth, Texas	general information (visit)
individual	Houston, Texas	program design, funding corporate involvement
child care center	Midland, Texas	general information
employer - military	Randolph AFB, Texas	general information
employer - corporate	Washington, D.C.	general information
Federal government	Washington, D.C.	general information
media	Washington, D.C.	visit for article on child care

14

Conclusions and Recommendations

It is clear from this project and from other employer child care initiatives around the country that there is interest in employer-assisted child care. The questions which emerge are:

-- how does one convert "interest" into "action"?

-- what incentives are necessary to persuade employers to support child care for their employees?

-- how does one reconcile the urgency of employee demands for employerassisted child care with their often casual attitude toward the service once it is available and their employers' insistence on immediate "results"? As with any new child care program, building a clientele takes time and trust.

Converting Interest Into Action

Converting initial, or even sustained, employer-interest in child care into an action plan is difficult. There are simply too many vagaries in the world of business and industry which can defer or deflect plans for child care. Poor profits, corporate relocations, mergers, change of personnel staff, and change of management staff were cited by a number of the companies whose initial interest in the project did not result in participation. Child care was not a high priority for them and was easily dismissed when the internal or external business environments changed.

Any change in this situation will probably not occur until child care is widely accepted as part of the employee benefit/service package and is accorded the same priority as other elements in the package. It might be useful to review the history of employee benefits in order to determine how and why "traditional" benefits became an accepted cost of doing business. For whom were benefits first intended? How did they spread--from industry to industry? From area to area? What role did the providers of benefits play?

Financial Incentives

The issue of financial incentives for employers is complex, yet will be crucial to the future of employer-assisted child care. Most of the employers contacted as part of the project voiced concerns about the proverbial "bottom line", and most were quite skeptical of other employers' reported decreases in absenteeism and turnover and increases in productivity resulting from child care programs. Most of the companies participating in this project were not keeping their own absenteeism data and claimed little knowledge of reasons for turnover; none measured productivity.

In the absence of what they considered to be credible data on potential cost savings, these employers focused on the cost outlays. In discussing the program, the project staff specified the cost per child and suggested that most employees could reasonably be expected to pay two-thirds of the amount. There was not, nor can there ever be, any attempt to underplay or minimize the subsidy required of the employer. Thus, without any assured "return" to a company, financial support became a major issue.

For at least two companies, available tax deductions were not an incentive because the companies were not paying income taxes.

A number of companies, in addition to the six participants, offered to participate during the project period when no financial commitment was required. They stated at the outset that the program was attractive, but they would not consider financial participation once the project ended. They were not included in the project, but their candor cannot be overlooked. It validates the need for powerful financial incentives over a long enough period for a program to become well established and for the company to study for itself the benefits of providing child care assistance.

Broader Efforts

The findings of this project, especially the barriers to employer participation that were identified, indicate that current private initiatives and public/private partnerships for child care are not likely to provide immediate solutions to the shortage of affordable, quality child care. The private sector is simply not willing to take responsibility for what is a major public policy issue. There is, instead, a continuing need for policy directions which redefine the role of government, not diminish it. Demonstration projects such as the Employer-Assisted Home Based Child Care Delivery System are useful and should be encouraged, but only as part of a much broader effort which provides sustained and meaningful incentives for employers.

Appendices

Gerald G. Carlton, President
Madeline Mandell, Executive Director

Child Care Dallas
1499 Regal Row Suite 400
Dallas, Texas 75247
(214) 630-7911

FAMILY DAY CARE
FOR YOUR CHILD

WHAT: a program of high quality child care which is especially appropriate for infants and toddlers, and is provided by carefully selected, trained and monitored caregivers in the caregivers' own homes.

WHO: available to employees of . Priority for service will be given to infants and toddlers, preschool age siblings of these children and other preschool children of employees as space is available.

HOW: representatives of Child Care Dallas will meet personally with each of you who wish to enroll a child in the program to explore your needs and expectations for care. From this information, our staff will refer you to caregivers who most closely match you and your child's needs. You will select the caregiver who will care for your child.

HOW MUCH: the cost of the care is $49 per week per child. This includes meals and snacks that ordinarily occur during regularly scheduled hours of care; however, parents of babies on formula and/or prepared baby food are asked to supply these. The fee is based on enrollment rather than attendance.

WHERE: caregivers will be recruited from areas near where you live, along your way to work, or near your worksite--depending on your preferences. Completion of the questionnaire which you will receive today will help our staff know where to recruit caregivers to meet your preferences.

WHEN: homes are being developed now. Our staff will be arranging meetings with you soon in order to plan for your child's enrollment. After your child has been in care a short time, one of our staff will meet with you to discuss your satisfaction with the care. We will continue to be available to answer any questions or discuss any concerns you may have.

WHY: there is a great need for quality care for very young children in the Dallas area. Center-based for infants and toddlers is scarce and generally very costly. Many centers find it difficult to provide the individual attention that little children require. Family day homes offer a natural, intimate setting in which your child can be cared for by the same person each day. The hours of the home can be tailored to meet your work schedule, and care within the home will accommodate the individual needs of your child.

Because of the growing need for child care, many employers are beginning to look at how they can help their employees secure good child care. This program represents a new and innovative step in that direction.

A United Way Agency

APPENDIX B

1. What is/are the age(s) of your children? Circle all that apply.

0-3 mos	13-18 mos	3-4 yrs	6-11 yrs
4-6 mos	19-24 mos	4-5 yrs	12 or older
7-12 mos	25-36 mos	5-6 yrs	

2. In what area/zip code do you live? _____

3. How long does it take you to get to work?

15 minutes or less	30 minutes - 1 hour
15 - 30 minutes	1 hour or more

4. What hours do you work? _____

5. What form of transportation to work do you use? Circle the one you use most often.

Car, independently	Bus	Van pool
Car pool	Walk	Other _____

6. What child care arrangement(s) do you now have for your (each) child? Circle one for each child.

Child I _____ age	Child II _____ age	Child III _____ age
Relative in my own home	Relative in my own home	Relative in my own home
Non-relative in my own home	Non-relative in my own home	Non-relative in my own home
School	School	School
Relative in their own home	Relative in their own home	Relative in their own home
Non-relative in their own home	Non-relative in their own home	Non-relative in their own home
Day care center	Day care center	Day care center
Other	Other	Other

7. What is the main reason you chose this particular arrangement? Circle one for each child.

Child I	Child II	Child III
Cost	Cost	Cost
Only one available	Only one available	Only one available
Best available	Best available	Best available
Close to home	Close to home	Close to home
Close to work	Close to work	Close to work

8. How long have you had this arrangement? Circle one for each child.

Child I	Child II	Child III
0-3 mos	0-3 mos	0-3 mos
4-6 mos	4-6 mos	4-6 mos
7-12 mos	7-12 mos	7-12 mos
13-18 mos	13-18 mos	13-18 mos
19-24 mos	19-24 mos	19-24 mos
25-36 mos	25-36 mos	25-36 mos
Over 36 mos	Over 36 mos	Over 36 mos

9. How many other arrangements have you had for your (each) child currently in care? Circle one for each child.

Child I			Child II			Child III		
1	2	3	1	2	3	1	2	3
4	5	Over 5	4	5	Over 5	4	5	Over 5

10. What ended each arrangement? Circle one.

Dissatisfaction with care I moved

Caregiver quit Price too high Other _____

11. Have you ever lost time from work because of problems with child care?

Yes No

12. If so, how many days in the past year? _____

13. Have you ever arrived late for work or had to leave early because of problems with child care?

Yes No

14. If so, how many hours of work have you missed in the past year? _____

15. Approximately what are you paying each week for child care now?

Child I	Child II	Child III
$10-20	$10-20	$10-20
$21-25	$21-25	$21-25
$26-30	$26-30	$26-30
$31-35	$31-35	$31-35
$36-40	$36-40	$36-40
$41-45	$41-45	$41-45
$46-50	$46-50	$46-50
$51-55	$51-55	$51-55
$56-60	$56-60	$56-60
Over $60	Over $60	Over $60

16. Are your current arrangements satisfactory?

Yes No

17. If not, why not? Circle one.

Cost is too high My child doesn't seem happy

Turnover among caregivers is too great Too far from home or work

Not enough attention paid to my child Hours don't meet my needs

Other _____

18. Do you think it would be a good idea for *name of employer* to provide some form of child care assistance for employees?

Yes No

19. Why/why not? _____

_____

_____

20. What factors would be important to you in selecting a child care arrangement from among those that are convenient and affordable? Please indicate by placing a check in the appropriate column whether each of the factors below is very important, somewhat important, or not at all important.

	Very Important	Somewhat Important	Not At All Important
reliable and always available			
regulated (licensed or approved)			
serves nutritious meals			
safe and clean environment			
will care for sick child			
firm discipline			
warm caregiver			
opportunity to be with other children			
well equipped with toys and materials			
involves parents in decisions			
well trained, experienced caregivers			
small number of children			
child can be with younger and older brothers and sisters			
communicates with parents about details of child's day			
individual attention for each child			
caregiver is someone I like			
respectful of child's language and culture			

What other factors are important to you?_____

21. Would you prefer child care near your home or near your work?

Near home Near work

22. Why?_____

_____

23. If *name of employer* participated in the pilot project described in the memo, would you give up your current arrangement to use the new system? Circle one

Yes No

24. If yes, under what circumstances? Circle one

Lower cost More convenient My current arrangement ended Other_____

25. If not, why not? Circle one

I don't want my child to experience a change

I am satisfied with my current arrangement

It's not the role of my employer to assist me with child care

I like to separate my work and personal life

Other_____

26. Can you pay up to $50 per week for child care?

Yes No

27. If you were to use this system, would it encourage you to stay with the company?

Not at all Slightly More than likely Definitely

28. Do you think that this system will benefit the company in general?

Yes No

29. If so, why?

Aid recruitment Contribute to morale Reduce absenteeism

Reduce turnover Improve public image Other _____

_____

30. If no , why not?

Won't reduce absenteeism Won't reduce turnover

Won't improve public image It's a benefit only to a few

Other _____

31. Would it benefit the company in relation to the work you do?

Yes No

32. If yes, how? _____

_____

33. If no, why not? _____

_____

34. What concerns do you have with regard to the company participating in this project?

_____

_____

_____

35. What problems might there be in gaining employees' acceptance of this project?

_____

_____

_____

36. Do you have any comments or suggestions to add?

_____

_____

_____

_____

Thank you.

PERSONNEL MEMORANDUM

NO: PM-82-32

August 23, 1982

FROM: Eunice Manes, Vice President, Personnel

SUBJECT: CHILD CARE

Blue Cross and Blue Shield of Texas recognizes how effective some type of child care program could be in attracting and retaining quality employees. We have the opportunity to be among several companies to participate in a pilot child care program if there is sufficient employee interest.

The Child Care Association of Metropolitan Dallas, a United Way agency, will be developing a new child care system primarily for infants and toddlers in response to the severe shortage of care for children of this age. A network of family day homes which can keep a maximum of 125 children will be established, staffed by carefully selected and trained workers and supervised to ensure a high quality of care. Cost would be approximately $50 per week, which in some cases is half the cost our employees are now paying for child care.

The location of the centers, the need for development of the centers and the number of spaces allocated to Blue Cross and Blue Shield of Texas employees will depend on the response we get to a CHILD CARE QUESTIONNAIRE. If sufficient questionnaires are completed indicating interest, then Child Care Association of Metropolitan Dallas would hold meetings at our offices to explain their programs.

It must be emphasized that there will be a maximum of 125 spaces for all four companies participating in the project, with spaces to be awarded on a first come, first served basis. Consequently it is vital that you complete the child care questionnaire just as quickly as possible.

Questionnaires will be available at the following locations:

Brookriver: Terri Botvidson, Room 705

Home Office: from a table just inside the door into Personnel in the West Lobby.

Dallas Sales Office: Don Zimmerman's office

Please return all questionnaires to Ann Nash, Personnel, West Lobby, Home Office, no later than August 27.

Distribution:
Home Office Employees
Brookriver Employees
Dallas Regional and District Office employees

APPENDIX C

Blue Cross
Blue Shield
of Texas

P. O. 225730 • Dallas, Texas 75265 • (214) 669-6427

EUNICE C. MANES
VICE PRESIDENT, PERSONNEL

September 1, 1982

THIS LETTER WAS SENT TO ALL EMPLOYEES ON MATERNITY LEAVE

Dear

Blue Cross and Blue Shield of Texas has the opportunity to be among several companies to participate in a pilot child care program.

The Child Care Association of Metropolitan Dallas, a United Way agency, will be developing a new child care system primarily for infants and toddlers. The location of the centers (either near the worksite or along commuter routes), the child composition in each home, and the number of homes will be determined by participating parents and the Association. This network of family day homes will be staffed by carefully selected and trained workers, and supervised to ensure high quality care. Cost would be approximately $50.00 per week for each child.

We would like to know your interest in this program. Please complete the enclosed form and questionnaire and return by September 10. This does not "commit" you - it simply gives us an idea of your potential need and allows us to know who to contact with further information. The Child Care Association plans to hold meetings at our offices to explain their program and answer employee questions. As these meeting dates and subsequent enrollment times are announced, we will let you know.

The number of spaces allocated to Blue Cross and Blue Shield of Texas is limited, with spaces awarded on a first-come, first-served basis. You will want to keep this in mind, therefore, as you make your child care plans.

If you have any questions, please feel free to call Bonnie Dangel, our Employment Manager, at 669-6370.

Sincerely yours,

Eunice C. Manes

ECM:cm

attachments: Response Form
Questionnaire

RESPONSE FORM

Due Date: September 10, 1982

☐ YES, I am interested in the pilot child care program for my child(ren). (This is not a commitment to enroll.)

Please keep me informed as information develops.

Employee's Name _____

Social Security Number: _____

Address: _____

_____

_____

Home Phone: _____

Approximate Date of Return to Work: _____

☐ I have completed the questionnaire.

☐ NO, I am not interested in the pilot child care program for my child(ren).

☐ NOTE: Please complete the questionnaire, even though you are not interested, so that our survey information will be complete.

THANK YOU.

PLEASE RETURN THIS FORM, ALONG WITH COMPLETED QUESTIONNAIRE TO:

Blue Cross and Blue Shield of Texas
P. O. Box 225730
Dallas, Texas 75265
Attention: Eunice Manes, Personnel Department

(A postage-paid, self-addressed envelope is provided for your convenience in returning your questionnaire.)

Personnel Memorandum

PM-82-41

October 6, 1982

SUBJECT: CHILD CARE MEETING

Blue Cross and Blue Shield of Texas is pleased to offer our employees an opportunity to participate in a pilot child care program which is being developed by the Child Care Association of Metropolitan Dallas.

Due to the favorable response to a recent questionnaire, we have reserved a number of spaces for our employees and will be one of four companies involved in this child care system. Those employees who have interest in this program should make proper arrangements with their supervisor to attend a meeting which will last approximately one hour.

RICHARDSON FACILITY	BROOKRIVER
October 13, 1982	October 13, 1982
10:00 a.m.	1:15 p.m.
Auditorium	Cafeteria

A representative from the Child Care Association will be available to fully explain the network of family day homes that they are establishing for, primarily, infants and toddlers. The representative will also answer any questions you may have. Cost will be about $50 per child per week, through payroll deduction.

The number of spaces allocated to Blue Cross employees is limited and will be awarded to those who sign up first. Employees may enroll at the end of the meeting on October 13.

If you are interested in this program but are unable to attend the meeting, please notify Ann Nash, Personnel, 669-6428, prior to October 13.

Through this program, we hope to give our employees another alternative from which to select the best type of child care arrangement for their families.

E. Mares

ECM/an

DISTRIBUTION: All Dallas Employees

ADVANCE
A PUBLICATION OF BLUE CROSS AND BLUE SHIELD OF TEXAS — MARCH 1983

Child care pilot project places children 'family-style'

Valerie Best, left, of Child Care Dallas, counsels Sharonda Dirks on the new pilot program.

An innovative, highly individualized child care pilot program will give Blue Cross and Blue Shield of Texas employees an opportunity to place their children in home care settings.

The program was announced last year. Employees who have signed up for the program are now in the process of choosing the homes and caregivers for their children.

Sponsored by Child Care Dallas, a United Way Agency, the program is a national demonstration project; four companies including Blue Cross and Blue Shield of Texas are participating locally.

"It provides the same type of care that the child would receive in a home environment," explained Employment Senior Manager Bonnie Dangel, coordinator of the project.

Licensed and trained caregivers will take care of no more than four children each, including their own, in their own homes. The maximum of four children includes a maximum of two infants.

The weekly fee of $49 includes meals and snacks for the child. Caregivers are recruited from areas where the employee lives, works, or on the route to work as the employee requests. Caregivers are selected individually by the employee prior to enrollment of the child.

Bonnie emphasized that this type of care would ordinarily cost the employee $75 or more per week, so the employee is getting very high quality care at a reduced amount.

After the child has been in care for a short time, Child Care Dallas counselors will meet again with the employee to discuss satisfaction with the care provided and will continue to be available to answer any questions which may come up.

Child Care Dallas began this program out of a need for quality care for young children in the Dallas area, particularly for parents who don't have the alternative of having

Peggy Cane, left, gets child care information from Diana Range, right, Child Care Dallas. Both Sharonda and Peggy are Customer Service representatives.

the child cared for by a family member.

In addition, space in child care centers, especially for infants and toddlers, is scarce and costly. Also, it may not provide the type of individual attention the parents would prefer the child to have. "Family day homes offer a natural, intimate setting in which your child can be cared for by the same person each day," according to Child Care Dallas.

Based on interviews with interested employees, Blue Cross and Blue Shield of Texas reserved 20 spaces in the program. To date, 15 employees have signed up and Child Care Dallas is working with them to select homes.

walking a tightrope?
see your credit union
Save a little each payday at your credit union.

FOR INTEROFFICE CORRESPONDENCE ONLY

THE SOUTHLAND CORPORATION

DATE September 15, 1982 REPLY BY:

TO

FROM Dian Boyd, Corporate Personnel

SUBJECT PILOT CHILD CARE PROGRAM

Dear

As you know, we are looking at a proposed employer-assisted child care program to assist employees in solving their child care problems and at the same time reduce absenteeism, decrease turnover, and increase productivity. An integral part of the procedure is to have a meeting to explain more fully how the proposed program works and to determine an interest.

The employee(s) listed below has/have been identified as possible participants in our program. We respectfully request that he/she/they be allowed to attend a meeting concerning the program. We will do our best to limit our meeting to the minimum amount of time possible.

Thank you for your cooperation.

Respectfully,

Dian Boyd

Dian Boyd
Corporate Personnel

NAME	PLACE OF MEETING	DATE/TIME
	North Wing Auditorium	Sept. 20th, 4:00 p.m.

LIMIT EACH LETTER TO ONE SUBJECT

APPENDIX G

FOR INTEROFFICE CORRESPONDENCE ONLY

THE SOUTHLAND CORPORATION

DATE September 27, 1982

REPLY BY:

TO All Employees Interested In Southland's Proposed Day Care Program

FROM Dian Boyd, Corporate Personnel

SUBJECT Follow-up on Pilot Day Care Program

Dear Fellow Employees:

As a follow-up on the meeting that was held September 20, 1982 you will find attached a summary of the information covered.

I have requested that twenty-five (25) spaces be reserved for Southland's employees and their infants/toddlers. These spaces will be available on a first-come first-served basis. In order to reserve a space for your child, please fill out and return to me the request form below.

Sincerely,

Dian Boyd

DB:bh

I would like to reserve _____ space(s).

I would like to use reserved space(s) beginning _____, 1983.

My child will be _____weeks/years old.

My home address is _____

_____Zip_____

My work number is _____

My home phone number is _____

My name is _____

LIMIT EACH LETTER TO ONE SUBJECT

APPENDIX H

VOLUME 3, NUMBER 8
OCTOBER, 1982

CORPORATE CONNECTIONS

Family day care for your child

Dian Boyd

As the price of child care goes up and its availability diminishes, the management of Southland has become more concerned about the problems employees face in finding acceptable care for their children.

To assist corporate office employees in solving their child care problems, the company will be participating in a unique model program with Child Care Dallas, formerly known as Child Care Association of Metropolitan Dallas.

The proposed employer-assisted care system is a program of high quality child care which is especially appropriate for infants and toddlers and is provided by carefully selected, trained and supervised caregivers in the caregivers' own homes. Each caregiver will be recruited from areas where corporate office employees live, along their way to work, or near employees' worksite . . . depending on preference.

The first homes will be available in January 1983. Child Care Dallas will arrange meetings during November and December with each employee personally who wishes to enroll a child in the program to explore the needs and expectations for child care. From that information, Child Care Dallas will refer those employees to caregivers who most closely match that employee's and child's needs. Each employee will have final approval of the caregiver who will care for their child. After the child has been in care a short time, one of Child Care Dallas' staff will meet with the employee to discuss their satisfaction with the care. The staff will continue, however, to be available to answer any questions or to discuss any concerns the parent may have.

The cost of the care will be $49 per week per child. This includes meals and snacks that ordinarily occur during regularly scheduled hours of care; however, parents of babies on formula and/or prepared baby food are asked to supply these. The fee is based on enrollment rather than attendance.

We feel this system can be an advantage for our employees and their children because of the stable, secure child care arrangements which are critical not only to a child's development, but also to his parent's capacity to handle the often conflicting demands of work life and family life. This service, however, may not meet the needs of all working parents/employees so Personnel has purchased copies of REPORT CARD which is a guide to 335 Dallas area child care facilities.

REPORT CARD includes preschool, kindergarten and elementary school programs as well as before and after school care for school-aged children. This book will be made available to those parents looking for larger group situations, academically oriented programs, Montessori or religious based curriculums. Cost of each program is published.

For more information about Child Care Dallas' proposed employer-assisted program or REPORT CARD contact Dian Boyd, Corporate Personnel, at 828-7782.

Corporate Connection Editors

Executive Editor	Bert, 559-0850
News Editor	Karen Miller, 7364
Special Events	Anita Trutna, 7220
Sports Editor	Mickey Negron, 7130

APPENDIX I

Texas Department of Human Resources

Form 291
August 1980

FAMILY DAY HOME
STANDARD-BY-STANDARD EVALUATION

Name of Facility

Address of Facility

Director and/or Responsible Persons

Date of Evaluation

☐ Date of Current License, or
☐ Date of Application

Standards marked by • do not require the presence of children.

1000 ORGANIZATION AND ADMINISTRATION	Compliance	Non-Compliance	N/A	Not Evaluated	Notes and/or Observations:
1100 Organization					
1. • Owner submits application	☐	☐	☐	☐	
• Care giver named	☐	☐	☐	☐	
• Care giver gives 3 references	☐	☐	☐	☐	
1200 General Administration					
1. License available	☐	☐	☐	☐	
2. • Minimum standards available	☐	☐	☐	☐	
3. Department notified of serious occurrence, abuse/neglect	☐	☐	☐	☐	
4. • Owner affirms that any employee or other person under indictment or against whom an official criminal complaint is returned will be reassigned or removed from contact with children	☐	☐	☐	☐	
1300 Enrollment					
1. Enrollment agreement with required information for each child	☐	☐	☐	☐	
2. • No racial discrimination	☐	☐	☐	☐	
1400 Records					
1. Progress records	☐	☐	☐	☐	
2. Daily attendance records (three months)	☐	☐	☐	☐	
3. Affirmation that complete financial records are kept	☐	☐	☐	☐	
4. Records available to Department during hours of operation	☐	☐	☐	☐	

Standards marked by • do not require the presence of children.

0 PERSONNEL	Compliance	Non-Compliance	N/A	Not Evaluated	Notes and/or Observations:
2100 Staff Qualifications and Responsibilities					
1. • Care giver 18+, read and write	☐	☐	☐	☐	
2. • Care giver has not been convicted within previous 10 years of offenses covered in standards	☐	☐	☐	☐	
3. • Care giver submits required information to Department	☐	☐	☐	☐	
4. • Care giver responsible for standards. Care giver or responsible adult at facility	☐	☐	☐	☐	
5. Complete personnel records maintained	☐	☐	☐	☐	
6. • Care giver able to handle responsibility	☐	☐	☐	☐	
7. • No person having contact with children convicted within previous 10 years of offenses covered in standards	☐	☐	☐	☐	
8. Persons whose behavior or health status endangers the children not allowed at the facility	☐	☐	☐	☐	
9. • Persons have TB exam	☐	☐	☐	☐	
10. Staff relate well with children	☐	☐	☐	☐	
2200 Staff-Child Ratio					
1. No more than six children under age 14	☐	☐	☐	☐	
2-3. Staff-child ratio met	☐	☐	☐	☐	
4. Children supervised at all times	☐	☐	☐	☐	
5. Children not out of control	☐	☐	☐	☐	
3000 BUILDING, GROUNDS, AND EQUIPMENT					
3100 Space					
1. • Thirty square feet of indoor space	☐	☐	☐	☐	
2. • Outdoor play area	☐	☐	☐	☐	
3200 Furnishings					
1. • Working telephone with listed number	☐	☐	☐	☐	
2. Resting equipment for each child	☐	☐	☐	☐	
3300 Equipment					
Appropriate, sufficient indoor and outdoor equipment and materials available	☐	☐	☐	☐	
1. Arts and crafts	☐	☐	☐	☐	
2. Building	☐	☐	☐	☐	
3. Reading and language	☐	☐	☐	☐	
4. Dramatic play	☐	☐	☐	☐	
5. Large muscle	☐	☐	☐	☐	
6. Manipulative	☐	☐	☐	☐	
7. Music	☐	☐	☐	☐	

Standards marked by • do not require the presence of children.

	Compliance	Non-Compliance	N/A	Not Evaluated	Notes and/or Observations:
3400 Toileting Arrangements					
1. Bathroom and toilet equipment adequate . .	☐	☐	☐	☐	

4000 FIRE, SANITATION, AND SAFETY

4100 Fire					
1. First responsibility is evacuation of children .	☐	☐	☐	☐	
2. • Annual fire inspection	☐	☐	☐	☐	
3. Fire drills every 3 months	☐	☐	☐	☐	
4. • House structure permits exit	☐	☐	☐	☐	
a. • Over one story approved	☐	☐	☐	☐	
b. • Two doors on different sides	☐	☐	☐	☐	
c. • Doors open easily	☐	☐	☐	☐	
d. • Doors and pathways clear	☐	☐	☐	☐	
5. • Heating devices not fire hazards	☐	☐	☐	☐	
6. • Combustible material kept away from heat sources	☐	☐	☐	☐	
4200 Sanitation					
1. • Annual sanitation inspection	☐	☐	☐	☐	
2. • Building, grounds, and equipment cleaned and repaired	☐	☐	☐	☐	
3. • Adequate light, ventilation, and heating . . .	☐	☐	☐	☐	
4. • Adequate water supply	☐	☐	☐	☐	
5. • Garbage kept in containers with tight lids, away from areas used by children, removed from home twice a week	☐	☐	☐	☐	
6. Home free of insects and rodents	☐	☐	☐	☐	
7. Staff and children wash hands	☐	☐	☐	☐	
4300 Safety					
1. • Building, grounds, and equipment safe and in good repair	☐	☐	☐	☐	
a. • Electrical outlets covered	☐	☐	☐	☐	
b. • Electric fans and heaters out of children's reach	☐	☐	☐	☐	
c. • Window air conditioners screened	☐	☐	☐	☐	
d. • Stairs and porches over 2 feet have railings .	☐	☐	☐	☐	
e. • Stationary outdoor equipment anchored . .	☐	☐	☐	☐	

Standards marked by • do not require the presence of children.

		Compliance	Non-Compliance	N/A	Not Evaluated	Notes and/or Observations:
(f)	• Yard dry and safe	☐	☐	☐	☐	
(g)	No exploding or shooting toys	☐	☐	☐	☐	
(h)	• No poisonous materials on toys, furnishings, or equipment	☐	☐	☐	☐	
	• No toxic substances accessible to children	☐	☐	☐	☐	

5000 PHYSICAL HEALTH

5100 Health Requirements for Children

1.	Health statement prior to admission for each child	☐	☐	☐	☐	
2.	Annual health statement for each child	☐	☐	☐	☐	
3.	Home complies with laws, rules, and regulations regarding immunization of children	☐	☐	☐	☐	
4.	Children tested for TB according to recommendation of Texas Department of Health	☐	☐	☐	☐	

5200 Illness and Injury

1.	Ill child not admitted	☐	☐	☐	☐	
2.	Illness handled to protect all children	☐	☐	☐	☐	
a.	Ill child separated on cot, parents called, child closely watched	☐	☐	☐	☐	
b.	First aid given, emergency medical care obtained when needed	☐	☐	☐	☐	
3.	Admission or readmission after contagious disease according to recommendations of Texas Department of Health	☐	☐	☐	☐	
4.	First aid supplies handy and guide posted	☐	☐	☐	☐	

5300 Medications

1.	Medication given as required by standard	☐	☐	☐	☐	
2.	Medicines out of children's reach	☐	☐	☐	☐	
3.	Refrigerated medicine separated from food	☐	☐	☐	☐	
4.	Medicine returned or disposed of	☐	☐	☐	☐	

5400 Emergency Phone Numbers

1.	• Emergency phone numbers posted	☐	☐	☐	☐	
2.	Parents', physicians telephone numbers accessible	☐	☐	☐	☐	

Standards marked by • do not require the presence of children.

	Compliance	Non-Compliance	N/A	Not Evaluated	Notes and/or Observations:
5500 Animals					
1. • Animals vaccinated	☐	☐	☐	☐	
2. • House and yard free of stray animals	☐	☐	☐	☐	

6000 FOOD SERVICE AND NUTRITION

	Compliance	Non-Compliance	N/A	Not Evaluated
6100 Food Service				
1. All food and drink safe, stored, prepared, distributed, and served in a safe and sanitary way	☐	☐	☐	☐
2. • Cleaning supplies clearly marked and separated				
3. Single use items discarded after use. Washable items washed after each use	☐	☐	☐	☐
4. Children encouraged but not forced to eat	☐	☐	☐	☐
6200 Nutrition				
1. Home ensures nutritional well-being of child				
a. Regular meals and snacks	☐	☐	☐	☐
b. If food brought by child does not meet requirements, home supplies additional food necessary	☐	☐	☐	☐
c. Special diets approved in writing by a physician	☐	☐	☐	☐

7000 ACTIVITIES

	Compliance	Non-Compliance	N/A	Not Evaluated
7100 Operation				
1. Activities suited to ages, interests, and abilities of the children	☐	☐	☐	☐
a. Supervised nap	☐	☐	☐	☐
b. Outdoor play and indoor quiet and active activities	☐	☐	☐	☐
2. Safety ensured on field trips	☐	☐	☐	☐

Standards marked by • do not require the presence of children.

	Compliance	Non-Compliance	N/A	Not Evaluated	Notes and/or Observations:
7200 Discipline and Guidance					
1. Promotes self-discipline and good behavior	☐	☐	☐	☐	
2. No harsh, cruel, or unusual punishment	☐	☐	☐	☐	
a. No shaking or hitting; no spanking of children under 5	☐	☐	☐	☐	
b. Written policy, if spanked, meets requirements	☐	☐	☐	☐	
c. No child placed in locked room	☐	☐	☐	☐	
d. Children not shamed	☐	☐	☐	☐	
No abusive or profane language	☐	☐	☐	☐	
Punishment not associated with food, naps, toilet training	☐	☐	☐	☐	
7300 Infant and Toddler Care					
1. Infants under 18 months in safe place	☐	☐	☐	☐	
2. Infants not left alone	☐	☐	☐	☐	
3. • Cribs for infants who cannot climb	☐	☐	☐	☐	
4. Infants talked to, held, and played with	☐	☐	☐	☐	
5. Outside crib time a.m. and p.m.	☐	☐	☐	☐	
6. Awake infants left in cribs for no longer than one hour	☐	☐	☐	☐	
7. Feeding bottles marked	☐	☐	☐	☐	
8. Infants have approved diet plan	☐	☐	☐	☐	
9. Infants under 6 months held while bottle fed					
10. Infants not held for feeding fed safely and comfortably	☐	☐	☐	☐	
11. Diapers changed promptly	☐	☐	☐	☐	
a. Appropriate diaper changing surface	☐	☐	☐	☐	
b. Individual washcloths and towels or disposable towlettes	☐	☐	☐	☐	
c. Soiled or wet cloth diapers promptly rinsed.	☐	☐	☐	☐	
Containers for used diapers cleaned daily	☐	☐	☐	☐	
7400 Children Needing Special Care					
Recommendations followed for child with special needs	☐	☐	☐	☐	
7500 Evening and Night Care					
1. • Evening/night care fire and safety standards met	☐	☐	☐	☐	
2. Staff awake until children are asleep	☐	☐	☐	☐	
3. Opportunity to bathe	☐	☐	☐	☐	
4. Child has cot with mattress and pillow	☐	☐	☐	☐	
a. • Pillows and mattresses have washable protective coverings	☐	☐	☐	☐	
b. Each child has own clean linens and cover	☐	☐	☐	☐	
7600 Water Activities					
1. Splashing and wading pools:	☐	☐	☐	☐	
a. • Drained and cleaned after each use	☐	☐	☐	☐	
b. • Stored out of children's reach	☐	☐	☐	☐	
c. Use supervised as required by standard	☐	☐	☐	☐	
2. Swimming pools:	☐	☐	☐	☐	
a. • Enclosed by a 6 foot fence; gates locked when not in use; machinery rooms locked	☐	☐	☐	☐	
b. • Maintained according to Department of Health standards	☐	☐	☐	☐	

Standards marked by • do not require the presence of children.

	Compliance	Non-Compliance	N/A	Not Evaluated	Notes and/or Observations:
c. • Enough lifesaving equipment	☐	☐	☐	☐	
d. Certified lifeguard on duty	☐	☐	☐	☐	

7700 Transportation

1. Children safely seated when vehicle in motion	☐	☐	☐	☐	
2. Children loaded and unloaded safely	☐	☐	☐	☐	
3. • First aid kit in vehicle	☐	☐	☐	☐	
4. Open back of truck not used for transporting children	☐	☐	☐	☐	

CHILD CARE DALLAS
FAMILY DAY HOME ASSESSMENT PROFILE

Name of Caregiver:	Date of Initial Assessment:	
I. ENVIRONMENT A. INDOOR	INITIAL ASSESSMENT	FOLLOW-UP
* 1. There is a special "children's" play space which is warm, inviting and attractive.		
2. A quiet "private" place is easily accessible to each child.		
3. Areas of the house are open for children to move freely.		
* 4. There is adequate space for each child to rest/nap.		
5. Cribs are spaced so that infants cannot climb into another crib.		
6. Low shelves or containers are used for toys when not in use.		
7. A container is provided for each child to keep her special things.		
8. Space is organized to meet the developmental needs of the children.		
* 9. Home is well lighted.		
*10. There is adequate ventilation (heating/cooling).		
11. Materials and equipment are in good repair.		
B. OUTDOOR		
*12. Outdoor play area is fenced.		
*13. Outdoor equipment is in good repair.		
*14. Splintered, rusted or otherwise broken, unsafe equipment is removed from play space.		
15. Plan of outdoor space permits variety of activities to include: water, digging, and messy activities;		
16. Climbing, crawling, and sliding;		
17. Riding and hauling;		

* Required upon initial assessment. Other standards must be met once children are in care.

APPENDIX K

CHILD CARE DALLAS
FAMILY DAY HOME ASSESSMENT PROFILE

Name of Caregiver:	Date of Initial Assessment:	
I. ENVIRONMENT A. INDOOR	INITIAL ASSESSMENT	FOLLOW-UP
* 1. There is a special "children's" play space which is warm, inviting and attractive.		
2. A quiet "private" place is easily accessible to each child.		
3. Areas of the house are open for children to move freely.		
* 4. There is adequate space for each child to rest/nap.		
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11. Materials and equipment are in good repair.		
B. OUTDOOR		
*12. Outdoor play area is fenced.		
*13. Outdoor equipment is in good repair.		
*14. Splintered, rusted or otherwise broken, unsafe equipment is removed from play space.		
15. Plan of outdoor space permits variety of activities to include: water, digging, and messy activities;		
16. Climbing, crawling, and sliding;		
17. Riding and hauling;		

* Required upon initial assessment. Other standards must be met once children are in care.

I. ENVIRONMENT B. OUTDOOR (continued)		INITIAL ASSESSMENT	FOLLOW-UP
18.	Creative activities.		
19.	Materials are changed in response to children's interests or to stimulate and enhance play.		
20.	There is a convenient storage space for outdoor equipment and materials.		
	C. SAFETY		
21.	The home and equipment are arranged so the total environment used by the children is safe.		
*22.	Gates or other protective barriers are used where necessary.		
*23.	Safety locks are used where household cleaners, yard sprays, drugs, and other dangerous substances are stored.		
24.	There is a well-stocked first aid kit and thermometer.		
25.	Caregiver demonstrates knowledge of first aid.		
26.	Caregiver demonstrates knowledge of treatment of serious injuries.		
27.	There is a plan of action for child with rising temperature, rash, vomiting, continuous diarrhea, or other signs of serious illness.		
28.	Children who have fever, rash, vomiting, or other signs of severe illness are not accepted for care.		
29.	There are clear guidelines, agreed to by parents, for accepting children who are ill.		
30.	Information about illness is communicated to parents of other children in care.		
31.	Medications (both prescription and non-prescription) are given only with written parental permission.		
*32.	Emergency numbers are posted near the telephone.		
33.	There is a plan for care of other children during an emergency.		
34.	There is a plan for emergency transportation to hospital/clinic.		
35.	Seat belts, infant and/or toddler seats are used when children are being transported in the car.		
36.	Good health habits are practiced and taught to children (hand-washing, brushing teeth, etc.).		
37.	Meals are planned to meet nutritional needs of young children.		

I. ENVIRONMENT C. SAFETY (continued)		INITIAL ASSESSMENT	FOLLOW-UP
38.	Efforts are made to limit the amount of refined sugar and food additives (i.e. orange juice instead of punch).		
39.	Fresh foods (eggs, vegetables, fruit juice, milk, etc.) are served.		
40.	There is a plan for natural disasters(i.e. tornadoes, flooding, etc)		
II. DEVELOPMENT A. EMOTIONAL			
41.	Organization of daily schedule - there is a consistent sequence of daily activities.		
42.	Routines are flexible as necessary.		
43.	The daily routine includes time for arrival, indoor and outdoor play periods, eating, napping, special activities, and departure.		
44.	Children's TV viewing is limited to two hours per day and restricted to children's programs.		
45.	Children participate in family life activities in age appropriate ways (help with snack preparation, set table, put toys away, etc.)		
46.	Children have experiences outside of the day home (walks, go to park or library, etc.)		
47.	The individual differences and needs of each child are responded to.		
48.	A reasonable amount of childlike behavior is accepted.		
49.	There is no physical punishment, verbal abuse, shaming, or rejection of a child whose behavior is being limited.		
50.	Children are allowed to express a range of emotions.		
51.	Others who live in the home or visit frequently enjoy and interact appropriately with the children.		
52.	Snacks/meals are pleasant with positive communication.		
53.	Caregiver is involved with children the majority of the time.		
54.	Affection and warmth are offered in words and actions.		
55.	Caregiver patiently listens to children and answers questions.		
56.	Caregiver tells children what they can do.		

II. DEVELOPMENT		INITIAL ASSESSMENT	FOLLOW-UP
	A. EMOTIONAL (continued)		
57.	Specific praise is used to recognize positive behavior (i.e.: "You put the book right where it belongs.")		
58.	Caregiver distinguishes between unacceptable behavior and child (i.e. "You must not hit John" vs. "You are a bad boy.")		
59.	Inappropriate behavior is stopped firmly, calmly, and consistently in an age appropriate manner.		
	B. PHYSICAL		
60.	Caregiver provides a calming transition period (quiet play, story) before napping.		
61.	Children's individual "getting read for sleep" needs (special object, ritual patting) are known.		
62.	Infants are held while being bottle fed.		
63.	Weaning is done gradually.		
64.	Good nutritional practices are modeled.		
65.	Children are urged to taste all foods, but not required to finish.		
66.	As children become able to feed themselves they are encouraged to do so.		
67.	Children's readiness for toilet training is known.		
68.	Children's efforts towards bowel and bladder control are praised.		
69.	Gentle reminders at appropriate times are given to children being trained.		
70.	There is no shaming, embarrassment, or punishment for toileting accidents.		
	C. COGNITIVE In addition to the normal contents of any home, the following should be provided:		
71.	A supply of varied consumable materials available to children (paper, crayons, fingerpaints);		
72.	A supply of varied permanent materials sufficient for the number of children in care(books, puzzles, manipulative toys, push&pull toys).		
73.	Materials are appropriate to age groups in size and complexity;		
74.	Materials reflect the family life styles and ethnic groups of children represented in the day home.		

II. DEVELOPMENT C. COGNITIVE (continued)		INITIAL ASSESSMENT	FOLLOW-UP
75.	Language development is encouraged through stories, word games, action songs, and other verbal activities.		
76.	Opportunity to look at and become familiar with books and be read to every day.		
77.	The opportunity is presented to engage in manipulative play and practice new skills.		
78.	Opportunities for dramatic play and make believe are presented.		
79.	A variety of musical instruments, record or tape player, records & tapes appropriate to age level interests of children are available.		
80.	Natural materials and materials from the child's own home are an important part of the program.		
81.	Opportunities for the children to: create, scribble, draw, paint, construct, cut, glue, etc.		
	III. CAREGIVER-PARENT RELATIONSHIPS		
82.	Communicates daily with parents (informal discussion about child's day, progress, interests, etc.)		
83.	Uses phone calls and/or sets aside time for occasional parent "visits" to discuss child's progress, mutual concerns & future plans.		
84.	Collaborates closely with parents to coordinate approach to: toilet training;		
85.	Weaning;		
86.	Food transitions;		
87.	Self-help skills;		
88.	Intake;		
89.	Departure.		
90.	Children's "home routines" are known.		
91.	When "home routines" can not be followed, alternate plans are discussed and agreed upon with parents.		
92.	Respect for the child's family is communicated: positive references to family are made during the day.		
93.	Children are encouraged to talk about their parents.		
94.	Children are helped to make transitions to home at end of the day.		

FAMILY DAY HOME SOCIAL STUDY SUMMARY

The Family Day Home Social Study Summary is intended to be a synopsis of all the findings resulting from the interviews you've had, the documents gathered and inspections conducted. The home study should address (at a minimum) the following topics.

1. Family Composition

   a. All adults living in the home, their names, ages and relationship to one another.
   b. Names and ages of all children in the home.
   c. If the prospective caregiver is married, the length of the marriage and her husbands occupation.
   d. The family's reaction to the wife/mother's desire to become a family day home caregiver.
   e. Overall "tone" of the family.

2. Home

   a. Description of the home.
   b. Overall condition of the home: indoors and outdoors.
   c. Identification of primary play space.

3. Motivation

   a. The prospective family day home caregiver's motivations for caring for children.
   b. Her understandings related to our relationship to her home.

4. Results of Licensing Requirement Study

   a. What is previous training or experience?
   b. What did references reveal?
   c. What is the condition of the prospective caregiver's health? her family?
   d. Did fire/health inspections identify deficiencies? How were they corrected?
   e. What were the results from the Standard by Standard evaluation?

5. Evaluation

   a. Strengths of the prospective family day home caregiver.
   b. Weaknesses of the prospective family day home caregiver. (areas which training is needed)
   c. Limitations of home: Ages of children to place in the home, developmental stage or type of children which this home is appropriate/inappropriate.

RICHARDSON DAILY NEWS Friday, October 21, 1983

Child care effort looking for homes

Program teams corporations, working parents with substitute mothers

By KATE SULLIVAN
RDN News Editor

DALLAS — Child Care Dallas is looking for working parents, substitute mothers and corporations interested in teaming up to provide day-care for young children in Dallas-area homes.

Four people in Richardson now are caring for children in their homes through the Corporate Initiative program, but more homes are needed in Richardson, Garland, Plano and Northeast Dallas, Diana Range, program manager, said earlier this week.

Child Care Dallas, established in 1901 to care for the children of women working in cotton mills, earlier this year received a $211,654 federal grant to start the program, which could serve as a model for other day-care programs throughout the nation.

Twenty-two children are being cared for now in 12 homes which have been screened by the agency as part of the program, and five corporations are participating. A number of other corporations, including several in the Richardson-North Dallas area, have expressed interest in the program, Ms. Range said.

Total cost per child is $74 a week. Parents pay $49 of the total and the corporations for which they work will be expected to pay about $25 per child when the grant period ends in February 1985, Ms. Range said. The corporations pay nothing now, but some, among them Blue Cross and Blue Shield of Texas, have used company newsletters to help publicize the project.

Thirty dollars a week per child will go to Child Care Dallas to provide training for the day care mothers, buy the cribs, toys and other equipment placed by the agency in each day-care home, and pay administrative costs, including the salaries

See Children, Page 2A

APPENDIX M

Children ...

Continued from Page 1A

of people who visit each home at least once every two weeks and work out special programs for each child involved.

The day-care mothers receive $44 a week per child, several dollars less than the going rate in the Richardson-North Dallas area for day-care in private homes, Ms. Range said, and this has made some day-care mothers reluctant to sign up for the program.

She said the program includes such advantages for the day-care mothers as free use of equipment, free training and help from professionals in dealing with child care problems.

Each day-care mother can care for two children under the age of two and two older pre-school age children, including [redacted] children. Most children being enrolled in the program are newborn babies, Ms. Range said, while the average age of the mothers is 29 and the average age of the fathers is 30.

"Most of them are professional people who delayed starting their families until their careers were established," she said.

The corporations interested in the program, she said, "are the ones which recognize day-care as an issue and realize they have valuable employees who are leaving because of child care problems."

Home-based care is more practical for employers than corporate day-care centers because the employers have no construction costs and the program can be adjusted quickly to meet the needs of employees, she said.

Further information can be obtained by phoning Ms. Range at 630-7921

120

121

GARLAND DAILY NEWS Tuesday, November 9, 1982

Federal grant targets infant, toddler care

A federal grant providing quality care for children of parents who work for one of five targeted corporations was announced Monday by Child Care Dallas, a United Way affiliate.

The $250 million grant from the federal Department of Health and Human Services provides administrative funds for the demonstration project, said Diana Range, project manager.

"Parents will pay the costs to the day mothers. Cost to parents will be $49 per week," she said. Comparable care for infants and toddlers runs in the $50-100 range for what Ms. Range called "quality care."

"We want to hear from mothers who are interested in keeping infants and toddlers," Ms. Range said. Her telephone number is 630-7911.

Called Corporate Initiate Child Care, the project's sole goal is to provide high quality care in day homes, the manager said.

Corporations involved include Blue Cross/Blue Shield, Southland, InterFirst Bank, RepublicBank and Mercantile Bank.

"We want applications from prospective day mothers and will begin placing children by the end of the week," Ms. Range said.

The Dallas White Rocker

THURSDAY, DECEMBER 23, 1982

Child Care Program needs house mothers

A locally-based national pilot day-care program needs support in the White Rock area, a Child Care Dallas official said.

A non-profit United Way agency, Child Care Dallas has been chosen from 5000 applicants as the model of the Parents Choice Project — a broker system in which the agency helps parents find appropriate child care from existent community resources. Child Care is looking for mothers with an infant or toddler to care for three children aged three and under in their own homes.

Forty-five per cent of all women with children under age six are working, putting preschool children in need of child care services, according to the agency. Eighty-four per cent of Texas' working mothers are working out of economic necessity, and an estimated 31,000 Texas preschoolers are left alone to fend for themselves while their parents work.

Child Care Dallas has received grants for a two-year start-up period for toys, equipment and administrators for the project. Working mothers are to pay $49 per week to have their children looked after in this personalised system, that is to be established to be self-supporting and actuarily sound, as a response to federal cutbacks.

House mothers, who will take in the children, will receive $44 per child, per week; with training, equipment and food provided by the agency. House mothers in White Rock are now being sought.

Child Care is also seeking the support of corporations to use the new system to refer working family employees to the day care system. Corporations that have joined include Southland Corporation, Blue Cross, Blue Shield and Republic Bank of Texas.

Diana Range of Child Care Dallas says that Child Care homes have been found in Richardson, Garland and Mesquite, and will be opened in January. Mrs. Range hopes to open 36 day homes by May 1983, serving 125 families.

Offices for the demonstration project will be opened by Jan. 3. Anyone interested in becoming a house mother is urged to call Diana Range at 630-7921.

Child Care Dallas was founded in 1901 by women whose names are still heard around Dallas: Tenison, Sanger, Lawther, Dealey, Everts, Harris and Jalonick, to provide day care and kindergarten to the children of East and North Dallas and the Cotton Mills District.

BROOKHAVEN COLLEGE CHILD DEVELOPMENT

Training for Child Care Dallas
Corporate Initiative Child Care Program

COURSE GUIDE
CD-100
Directed Participation in Early Childhood Programs

Developed by
HILDA LINN
©
Spring 1983

APPENDIX P

BROOKHAVEN COLLEGE CHILD DEVELOPMENT

Training for Child Care Dallas
Corporate Initiative Child Care Program

CD-100 Directed Participation in
Early Childhood Programs

Course Procedures

This course provides 30 hours of training for family day home caregivers. Activities in completing this one-credit course provide observation and participation experiences and activities with young children and family day home caregivers.

Activities include:

- 6 hours of observation and participation at two (2) Child Care Dallas Family Day Homes.
- Written assignments to complete the objectives relating to observation at the family day homes.
- Seminar/Workshop participation, activities, and assignments.
- Viewing and listening to audio-visual presentations.
- Participating in group discussions.

The observation-participation and written assignments equal 10 hours of instruction. The four Saturday seminar/workshops on April 9th, April 23rd, May 7th, and May 14th, 1983 equal 20 hours of in-class instruction. The Saturday seminar/workshops will be held at the Brookhaven Parent-Child Study Center (Building G) on the Brookhaven College campus from 9:00 a.m. to 2:00 p.m.

Your CD-100 grade will be based on the completion of observations, written assignments and seminar/workshop participation activities as assigned by your instructor, Hilda Linn.

If assistance is needed in completing the objectives, please call Hilda Linn at 620-4144 or Marjie Nolley at 620-4146.

GUIDELINES FOR COMPLETING THIS COURSE

1. Before observing at family day homes, read through the objectives and the observation-participation assignments in the course guide.

2. Using a dictionary, define all terms you find unfamiliar or new to you.

3. Arrange observations of family day homes through Child Care Dallas Corporate Initiative Child Care Program Staff.

4. Complete six hours of observation at two family day homes.

5. Complete observation-participation written assignments.

6. Participate in the 20 hours of seminar/workshop instruction at Brookhaven College.

7. Written assignments will be graded and returned to you upon completion of the course.

OVERVIEW OF OBSERVATION SKILLS

Observation skills are important for both observers and caregivers. Watching children provides useful clues about their needs and development. The observer sees child development principles and theories in action. Alert caregivers continually watch children's reactions to each other, to adults, and to their environment. Based on such observations, more successful activities, routines, and guidance can be planned.

Objective recording avoids using "judgment words" like "pretty," "bad," or "happy." These words assign the observer's meaning to the child's actions. An observer avoids judging or putting a value on the child's actions. An observer only writes down what is actually seen.

- Remember you are a guest in the caregiver's home.
- Observe professional ethics by remembering the confidential nature of your observation.
- Be professional in your observation by having your own pen/pencil, paper, notebook/clipboard and course guide.
- Concentrate on listening and seeing what is happening during your observation.
- Remain inconspicuous, interacting with caregiver and/or children only as often as necessary to complete your assignment.
- Do not discuss the children with the caregiver in the children's presence.
- Remember this is only a three hour observation, avoid being judgmental.
- Remember the caregiver's primary responsibility is to the children in her care. Please do not expect her to discuss your assignments or give you advice on setting up your family day home during this visit.

OBJECTIVES

After completing the family day home observations, you should be able to:

- Identify and discuss the caregiver's characteristics and responsibilities.
- Discuss how a caregiver's behavior influences a young child's total development.
- Identify the importance of a caregiver's understanding each child's individual needs and developmental stage.
- Identify routines necessary for the care of young children.
- Identify ways to insure a safe and healthy environment for young children.
- Identify appropriate indoor and outdoor environments for young children.
- Identify age-appropriate toys and equipment for young children.
- Identify nutritious, well-balanced meals and snacks which are appropriate for young children.

CD-100 OBSERVATION-PARTICIPATION ASSIGNMENTS

1. After observing at each family day home for 3 hours, describe specific caregiver characteristics and/or responsibilities that you observed. (Use the attached information sheet "Family Day Home Caregiver..." to guide you in answering this assignment.)

2. Write a report after each observation, discussing the following:

   - What child/adult ratio did you observe ?
   - What were the ages of the children?
   - What routines did you observe? Give an example of each.

     (routines include:
     toileting
     hand-washing
     eating times
     rest/nap times
     arrival/departure times
     transition times--activities that move children from one activity to another)

   - What specific ways were the family day homes arranged to allow for children's activities?
   - What activities were available for the children?
   - What age-appropriate toys and equipment were available for the children?
   - How did you feel while doing this observation?

3. (a) Before you observe at the family day home, list as many ways as possible to child-proof a home and list as many ways as possible to child-proof a yard.

   (b) Discuss how many of these were done at the family day homes you observed.

4. (a) After observing at each family day home, describe the caregiver's behavior and interaction with the children during mealtime. Include the menu as well as what the caregiver did to make the meal relaxed and enjoyable.

   (b) Describe the caregiver's behavior and interaction during bottle-feeding time.

   (c) Describe the children's behavior during mealtime and/or bottle-feeding time.

5. After observing at each family day home, describe one event, activity or happening involving a child that you would like to remember. Include the sequence of events, why this impressed you, and any other information you would like to share.

A FAMILY DAY HOME CAREGIVER IS ABLE TO:

-Provide for each child according to that child's developmental stage and individual needs.

-Be sensitive to children's feelings and ideas.

-Listen attentively to children in order to understand what they are saying and thinking.

-Communicate with children in a language and manner children understand.

-Relate to both children and adults with understanding and concern.

-Be emotionally responsive, taking pleasure in children's successes and being supportive during their troubles and failures.

-Exercise maturity and control without being threatening.

-Maintain patience and consistency with children throughout the day.

-Have sufficient stamina and agility to meet demands of running a family day home.

-Maintain and be responsible for her own health and the health of her own family.

-Help children to eat properly through a positive attitude and cheerful surroundings.

-Meet children's needs without sacrificing all her own and her family's needs.

-Establish relationships with parents which facilitate the free flow of information about their children's lives.

-Communicate and interact with parents in order to understand and consider their values for their children and the priority of those values.

-Create an atmosphere through example and attitude where it is natural and acceptable to express feelings, both positive and negative (such as love, sympathy, enthusiasm, pain, frustration, loneliness, anger, or disagreement.)

-Hold and touch children in such a way as to convey respect and, when appropriate, affection.

-Interpret children's behavior to others in ways which foster understanding and cooperation while accepting children's need to work out their own differences.

-Establish reasonable rules and limits which are understood and upheld by both children and adults.

-Identify and use the strengths and talents of parents, giving them every possible opportunity to participate in and enrich the children's program.

-Incorporate some of each family's culture (food, language, music and celebration of holidays) into the children's program in order to offer continuity between home and day home.

-Demonstrate respect for differing family needs, values and customs.

-Identify possible safety or health hazards and take the necessary steps to eliminate them.

-Maintain light,ventilation and temperature at the best possible levels.

-Organize the home so that the children can be appropriately responsible for the care of belongings and materials and for their individual health needs.

-Arrange the day home to allow for children's need for activity and movement as well as quiet times.

-Teach sound health and safety practices and serve as a model to the children.

-Verify that each child has fulfilled appropriate health requirements and keep appropriate health records.

-Respond calmly in emergency situations and take necessary action.

-Provide nutritious,well-balanced meals and snacks which appeal to children.

-Plan meals in advance and prepare meals and snacks so that young children are never left unsupervised.

-Practice sanitary procedures during food preparation, meal service, cleanup and food storage.

-Use the kind of materials, activities and experiences that encourage exploring, experimenting, questioning, that help children fulfill curiousity and gain mastery.

-Adhere to applicable standards for day homes.

-Maintain equipment, anticipate needs and keep adequate supplies for the running of a day home.

-Evaluate her own competence as a daymother.

Source: Family Day Home Training Notebook, Pilot Edition, State Department of Public Welfare and the Texas Department of Community Affairs, April, 1976.

****
* SAMPLE *
****

INFORMATION ON CHILD

NAME_____ BIRTH DATE _____

I. Developmental History

A) Pregnancy and Delivery - state any special problems.

_____

B) Physical Development

	EARLY	WHEN EXPECTED	LATE
rolled over	____	_____	____
sat up	____	_____	____
crawled	____	_____	____
walked	____	_____	____

C) Weaning and Eating

1. Is child completely weaned? _____
2. At what age was child weaned? _____
3. How? _____
4. Does child feed himself? _____
5. Does he use spoon and fork? _____
6. What are his favorite foods?

_____

7. What foods does he dislike?

_____

8. Does he have any feeding problems?

_____

9. Will your child eat breakfast at the day home? _____

D) Toilet Training

1. Is child toilet trained? yes _____ no _____ partially _____

2. Age when toilet training was begun? _____

3. Method used to train? _____

_____

4. Age when toilet training was completed: daytime _____
nighttime _____

5. Frequency of accidents? _____

6. Word used for bowel movements? _____

7. Word used for urination? _____

8. Does child ask to use toilet? _____

E) Sleep

1. Is your child used to taking an afternoon nap? _____

2. Are there special routines that help your child go to sleep?

_____

3. Does he sleep with a favorite toy? _____

If so, what? _____

4. Usual naptime? _____

5. Usual bedtime? _____

6. Usual morning wake up time? _____

7. Does child sleep in his own bed? _____ If not, with whom does he sleep? _____

8. Any sleep problems and how they are handled

Problem	How Handled
_____	_____
_____	_____

F) Speech

1. Can your child easily express himself? _____

2. Can you child be clearly understood? _____

F) Speech (continued)

3. Are you concerned that he may have a speech problem? _____

If so, of what nature? _____

4. Is your child bilingual? _____ What Languages? _____

G) Health

1. Have you ever had concern about your child's physical or mental development? _____

If so, when and what? _____

_____

2. Is your child taking any medications? _____ If so, what? _____

_____

3. Is your child allergic to any foods? _____

4. Has your child ever had any serious illnesses, accidents, or surgery? _____ If so, please list:

What	When

5. Has your child ever been a patient in a hospital? _____

When	How Long	Reason

II. Previous Child Care Experiences

1. Please list previous child care

Date (or age of child)	How Long?	Where?	Child happy with care?	Parent happy with care?

II. Previous Child Care Experiences (continued)

2. Has child been around other children his own age? _____

3. How does he get along with them? _____

4. Is he an active child? _____

5. Is he so active that you would say he rough and noisy? _____

6. How does your child feel about staying with unfamiliar adults or children?

_____

7. How do you think your child will adjust to the day home in the first few weeks?

easily ____ with some difficulty ____ with great difficulty ____

III. General

1. What do you like best about your child? _____

2. What does he do best? _____

3. Does he like help from you or does he like to do things for himself? _____

4. What are his favorite play activities? _____

5. Describe your child's fears _____

6. What types of situations might be upsetting to your child?

_____

7. Is your child attached to a special toy or object? _____

Will he be bringing it to the family day home? _____

8. When your child is upset, what seems to comfort him the most?

_____

9. How do you discipline your child? _____

Is it effective? _____

10. How frequently do you find yourself disciplining him?

_____

III. General (continued)

11. What worries you about your child the most? _____

_____

12. Is there anything I haven't asked about your child that would help us to know him better?

_____

_____

_____

_____

_____

Sakowitz, Pontiac reshuffle marketing divisions

By CANDACE TALMADGE
Staff Writer

Shaping up: GM's **Pontiac Motor Division** has restructured its sales organization, setting up a new regional office in Dallas for dealers throughout the Southwest.

Under the new organization, Pontiac's 26 zones will be formed into six regions reporting either to an assistant general sales manager in the East or West. **Steven A. Hoestal** will head the new Dallas office, which will handle the former Dallas, Houston, Kansas City and Oklahoma City zones.

And Houston specialty retailer **Sakowitz** also has reorganized its merchandising office, replacing it with a new division, which it calls an integrated marketing team, to combine merchandising with marketing research and sales promotion.

The company also will be cutting back some management jobs and has eliminated the post of general merchandising manager.

•

Sign of the times: Yet another round of incentives comes from hotels and car rental firms competing for recession-squeezed business travelers.

Radisson Hotel Corp. and **Budget Rent a Car** will offer free, 24-hour, unlimited mileage use of a Lincoln Town Car for each night's stay between Feb. 1 and Dec. 31. The program applies to Radisson hotels in 18 U.S. and Canadian cities, including Dallas.

And the **Sheraton-Park Central** is participating in a bonus plan through April 10. Regular-rate guests receive certificates redeemable for room costs in major cities. The certificates will be valid through Sept. 12 for a subsequent stay in Sheraton hotels and inns.

•

The winner is... The Dallas Advertising League will hand its annual Pro Bono Publico award to **Mary Kay Cosmetics** of Dallas at a luncheon Feb. 8.

•

Fun and games: The Dallas Market Center plans several special events during the **Dallas Toy Show**, March 20-24. The Toy Manufacturers of America will conduct a luncheon seminar on toy safety March 20. Later that day buyers can meet with the World Trade Center's consultant for free advice on their toy advertising programs.

"New directions in creative merchandising," scheduled March 21, will be a seminar on in-store promotions sponsored by Playthings magazine. There also will be gift-wrapping demonstrations and a seminar on dollhouses.

•

New & improved: Michael Beaty has formed **The Michael Beaty Agency** for print and broadcast models. **Aerospace Technologies Inc.** is the new name of Dalworth Tool and Manufacturing, Fort Worth.

"Go for 1000 in '83" is the theme of **Pulte Home Corp.'s** latest sales campaign. **Missouri Pacific Air-Freight** has expanded its Dallas operations with **Andy McDowell** as regional manager and C.A. "Chuck" **McDowell** as sales and marketing director.

Muse Air has created a "Smokers Survival Kit" available on all its flights. The pack offers mints, chewing gum, a swizzle stick and a Super80 pin, plus an offer of free return fare if the passenger cannot adjust to a totally smoke-free environment. The fare offer applies only to Muse's Houston-Los Angles or Houston-Midland-Odessa routes.

Randal Contract Furnishings is a new Dallas-based rep for seven makers of commercial wallcoverings. **Southwest Pump Co.** has introduced the 2 1 2, an electronic gasoline pump that can fuel four cars at a time.

Neral Color Corp. of Chicago recently opened a new Dallas sales office. Dallas is one of 11 cities with a new **Hall-Mark Electronics Corp.** Distribution Center franchise from Alco Switch of North Andover, Mass.

Telecommunication Audit Group, which audits company phone bills, has been formed in Dallas. **McBride and Brown Advertising** has moved to larger offices at 10210 Central Place.

Nowlin Savings of Fort Worth has opened a downtown branch. **Talon Technology Corp.** of Richardson has been formed to market mobile satellite data communications systems and consulting services to the petroleum, marine and defense industries.

Core Laboratories of Dallas has opened a new core analysis laboratory in Hebbronville. **Daisy Systems Corp.**, a computer-aided engineering firm, has opened a Dallas office to handle sales in the South.

Ted Riddell and Associates of the Dallas Trade Mart and **Ron Morris Associates** have merged their showroom operations. **EMS Print Shop and Office Supply** has opened a second location in the Menswear Mart.

Dallas Fitness Equipment how handles Nordic Fitness products. **Independence Mortgage** has a Dallas office to cover north central and eastern Texas. **Cordova Investors** is a new Dallas petroleum investment firm. **ARA Maintenance Management Systems** has expanded its line of computer maintenance products.

•

New accounts: Keller-Crescent/Southwest will handle PR for the fourth-annual Norwood Institute conference. **Point Communications'** recruitment advertising division has picked up corporate headquarters recruiting business from 7-Eleven operator Southland Corp.

Crume & Associates and **Crum Communications** will handle ads an PR for Spectradyne Inc of Richard son, operator of hotel pay-per-view systems. **McBride and Brown Adver tising** is agency for the portable ra division of Cooper Industries.

Child Care Dallas will develo and manage a family day home sys tem for employees at Blue Cros Blue Shield of Texas, RepublicBan Dallas and Southland Corp. with a $211,864 grant from the U.S. Depart ment of Health and Human Services

The Communications Departmen will produce training films and relat ed print material for Trane Co Cab co Corners decorative fabric store has chosen **SLW Media Services**, a division of Saunders, Lubinski & White, to handle media planning an placement for Dallas-Fort Worth Houston and San Antonio.

Bob Jennings, Dallas theatrical PI executive, will handle publicity fo bonniejean/hillco productions "Maximum Charge," which begin production April 1. The film will b shot in Dallas, Amarillo and McKin ney. **The Wilson Co.** now handles ad and PR for T-N-T (Taste and Take)

APPENDIX R

Dallas employers offer child care benefit

Several Dallas employers, including Southland Corp., the Dallas Times Herald and RepublicBank Dallas, are offering a new child care benefit program.

The program, offered through Child Care Dallas, a non-profit agency providing child care services in private homes, is partially funded by a $211,834 grant from the U.S. Department of Health and Human Services.

Child Care Dallas is contributing $44,000 toward the cost of the program, while participating employees will pay the rest of the cost, $40 per child weekly. Currently, the participating employers are not contributing directly toward the program's costs.

However, when the grant expires in two years, CCD will ask participating employes to fund a portion of the program, said Roberta Bergman, project director of Child Care Dallas. She added that CCD is trying to line up more employers to participate in the program.

Child Care Dallas collected information from employees at the participating companies on their child care needs. CCD then set up child care arrangements in 36 private homes in the Dallas area to provide care for up to 125 children.

Participating employees at the Dallas Times Herald will pay their share of the program's costs through payroll deduction, said Mary Trossen, employee relations manager. As of Jan. 19, five active employees, plus two other workers on maternity leave, indicated an interest in the CCD program.

The program is open to all 1,500 full-time Times Herald employees.

"We're looking at child care as something employers will have to pay attention to," explained Ms. Trossen.

Only 11 of the 1,200 employees at Southland Corp.'s headquarters, all of whom are eligible for the benefit, have said they're interested in the program, but the company has reserved 25 places in the program, said Dian Boyd, a company personnel specialist. Southland employees will pay CCD directly for the cost of the program.

Southland presented the program to its employees in November and expects the program to commence this month, a company spokesman said.

Southland will weigh several factors—including convenience, improved employee attendance, quicker return to work after maternity leave, quality of child care and employees' peace of mind—to decide whether to continue the benefit after the grant expires, the spokesman said.

Some 3,300 employees at RepublicBank Dallas are eligible for the child care benefit, which it publicized in the company newsletter in October, said Beth M. Brown, employee relations administrator. More than 60 employees attended a meeting explaining the benefit and 27 have shown a real interest.

The bank has reserved 16 spaces in the program, Ms. Brown said. Employees must pay their fees in advance directly to CCD.

Ms. Brown said the bank has not yet decided whether to fund the

APPENDIX S

LUBBOCK, TX.
MORN. AVALANCHE-JOURNAL
D. 58,000 — S. 84,100
LUBBOCK METROPOLITAN AREA

Grant Helps Firms, Workers With Child Care

DALLAS (UPI) — Michael Benjamin Cavin will be 2 years old next month and that's about how long his working mother has been struggling with the child care problem.

"At first he stayed with relatives," his mother, Deborah, recounted. "Then I put him in a day care center. But I didn't like that at all. They had trouble with people showing up in the morning. Sometimes in morning they would have only one person taking care of children of all ages, trying to watch them all.

"Then I tried another one and that didn't work out. Ben just didn't adjust too well. At the day care centers they switch personnel so often that he never got to know anybody."

"For two years, it has been a constant problem trying to find someone reliable."

The answer to Mrs. Cavin's problem came through her employer, RepublicBank Dallas. The company is one of three taking part in a federally funded program to develop and manage a family day home system for corporations.

Coordinating the program is Child Care Dallas, a non profit organization founded in 1899 to provide care for the children of women working in Dallas cotton mills. Supported by United Way, Child Care Dallas cares for 785 children through eight child care centers and 30 family day homes.

It received a $211,634 grant from the U.S. Department of Health and Human Services to operate the two-year program which will set up day home care for children of employees of several Dallas firms. Charter members are RepublicBank, Blue Cross-Blue Shield of Texas and The Southland Corporation.

The cost of the program is about $72 per child per week, of which $49 is paid by the parents. Money from the grant will pay the rest, which includes administrative expenses and the cost of equipping the day homes with necessary items such as toys, cribs, strollers, high chairs, fire extinguishers and first aid kits.

Several other companies, including both Dallas daily newspapers, have indicated an interest in the program. If it is to continue beyond two years, participating companies will have to pick up the cost now paid by the federal grant. The companies go into the program knowing that in two years time they will have to make that funding decision.

Roberta Bergman, the project director, said the program will be carefully evaluated.

"We will seek answers to four questions," she said. "Does it decrease (employee) turnover? Does it decrease absenteeism? Has it increased productivity? Has it increased job satisfaction?"

"Our long-range goal is that corporations more and more will see the need for child care," said Madeline Mandell, executive director of Child Care Dallas. "We hope they will understand the issues involved and understand that people just can't go out there and find high quality child care.

"We hope they will make it universally available to all employees, not just those who can afford $49 a week."

Mrs. Bergman went to the companies involved and conducted information programs. Parents who indicated an interest in the program usually had only one child. They were "very articulate," she said, asking intelligent questions that showed deep concern about the quality of care. Most of the women involved were in their 30s. Annual incomes of parents who indicated they would enter the program ranged from $20,000 to $80,000 per household.

Spokesman Mark McKay of RepublicBank said his company was committed to 15 placements in the program.

"If a mother has a problem getting a baby sitter, it becomes a problem for the bank," he said.

Mrs. Cavin, for example, is an experienced specialist in customer pension and profit-sharing plans. She signed up after attending a meeting at the bank. Michael Benjamin was one of the first children placed in the program.

"We were a little surprised to find that 25 or 30 percent of the applicants were from expectant parents. The average age of the expectant mother is about 30. They tend to be in middle management," Mrs. Bergman said.

Day home mothers are prepared to feed the children under their care breakfast, a morning snack, lunch and an afternoon snack. The foods are simple and the agency figures the cost will average about $1.21 per day. A Child Care Dallas nutritionist has drawn up a menu for the day home mothers to follow.

Child Care Dallas limits the number of children in one home to four, including the children of the mother. Every day home has a person designated as an "alternate care giver," who can take the children if the day care mother becomes ill. Alternates must be someone with whom the children are somewhat familiar.

Diana Range, the program manager, also stresses "bridging," the link between the child's parents and the day care mother with whom he may spend most of his time. Bridging means, in part, that the day home mother and the parents must have compatible views on child rearing and discipline.

"If there isn't a good relationship between parent and day mother, that situation isn't going to work out," Miss Range said.

APPENDIX I

TYLER, TX.
TELEGRAPH
D. 36,400
TYLER METROPOLITAN AREA

FEB 12 1983

Federal Grant Helps Corporations With Child Care Problems

By BRUCE B. BAKKE
UPI Business Writer

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"We were a little surprised to find that 25 or 30 percent of the applicants were from expectant parents. The average age of the expectant mother is about 30. They tend to be in middle management," Mrs. Bergman said.

APPENDIX U

143

144

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NEW ORLEANS, LA.
TIMES PICAYUNE -
STATES ITEM
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NEW ORLEANS METROPOLITAN AREA

Federal grant gives corporations a way to provide child care help

By BRUCE B. BAKKE

DALLAS (UPI) — Michael Benjamin Cavin will be 2 years old next month and that's about how long his working mother has been struggling with the child care problem.

"At first he stayed with relatives," his mother, Deborah, recounted. "Then I put him in a day care center. But I didn't like that at all. They had trouble with people showing up in the morning. Sometimes in the morning they would have only one person taking care of children of all ages, trying to watch them all.

"Then I tried another one and that didn't work out. Ben just didn't adjust too well. At the day care centers they switch personnel so often that he never got to know anybody."

"For two years, it has been a constant problem trying to find someone reliable."

The answer to Mrs. Cavin's problem came through her employer, RepublicBank Dallas. The company is one of three taking part in a federally funded program to develop and manage a family day home system for corporations.

Coordinating the program is Child Care Dallas, a non-profit organization founded in 1890 to provide care for the children of women working in Dallas cotton mills. Supported by United Way, Child Care Dallas cares for 765 children through eight child care centers and 30 family day homes.

It received a $211,634 grant from the U.S. Department of Health and Human Services to operate the two-year program which will set up day home care for children of employees of several Dallas firms. Charter members are RepublicBank, Blue Cross-Blue Shield of Texas and The Southland Corporation.

The cost of the program is about $72 per child per week, of which $49 is paid by the parents. Money from the grant will pay the rest, which includes administrative expenses and the cost of equipping the day homes with necessary items such as toys, cribs, strollers, high chairs, fire extinguishers and first aid kits.

Several other companies, including both Dallas daily newspapers, have indicated an interest in the program. If it is to continue beyond two years, participating companies will have to pick up the cost now paid by the federal grant. The companies go into the program knowing that in two years time they will have to make that funding decision.

Roberta Bergman, the project director, said the program will be carefully evaluated.

"We will seek answers to four questions," she said. "Does it decrease (employee) turnover? Does it decrease absenteeism? Has it increased productivity? Has it increased job satisfaction?"

"Our long-range goal is that corporations more and more will see the need for child care," said Madeline Mandell, executive director of Child Care Dallas. "We hope they will understand the issues involved and understand that people just can't go out there and find high quality child care.

"We hope they will make it universally available to all employees, not just those who can afford $49 a week."

Mrs. Bergman went to the companies involved and conducted information programs. Parents who indicated an interest in the program usually had only one child. They were "very articulate," she said, asking intelligent questions that showed deep concern about the quality of care. Most of the women involved were in their 30s. Annual incomes of parents who indicated they would enter the program ranged from $20,000 to $80,000 per household.

Spokesman Mark McKay of RepublicBank said his company was committed to 15 placements in the program.

"If a mother has a problem getting a baby sitter, it becomes a problem for the bank," he said.

Mrs. Cavin, for example, is an experienced specialist in customer pension and profit-sharing plans. She signed up after attending a meeting at the bank. Michael Benjamin was one of the first children placed in the program.

"We were a little surprised to find that 25 or 30 percent of the applicants were from expectant parents. The average age of the expectant mother is about 30. They tend to be in middle management," Mrs. Bergman said.

Day home mothers are prepared to feed the children under their care breakfast, a morning snack, lunch and an afternoon snack. The foods are simple and the agency figures the cost will average about $1.21 per day. A Child Care Dallas nutritionist has drawn up a menu for the day home mothers to follow.

Child Care Dallas limits the number of children in one home to four, including the children of the mother. Every day home has a person designated as an "alternate care giver" who can take the children if the day care mother becomes ill. Alternates must be someone with whom the children are somewhat familiar.

Diana Range, the program manager, also stresses "bridging," the link between the child's parents and the day care mother with whom he may spend most of his time. Bridging means, in part, that the day home mother and the parents must have compatible views on child rearing and discipline.

"If there isn't a good relationship between parent and day mother, that situation isn't going to work out," Ms. Range said.

—UPI telephoto

WHILE HIS MOTHER Deborah Cavin works all day, Michael Cavin, almost two years old, spends the day with Karen White, right, as part of a federally funded program to develop family day care homes. Michael stuffs candy into his mother's mouth when she comes to pick him up. Federal funding of the program lasts for two years. If the program is to continue after that, participating companies will have to pick up the cost now paid by the grant.

NEW ORLEANS MAGAZINE

The Fair's Wonderwall:
Architectural Artwork

Special Sections:

Florida's Gulf Coast Energy Futures

APPENDIX W
147

A Sampling of Local Day Care

One of the oldest and finest local examples of a privately owned, for-profit day care center is Children's Place at 6317 Argonne St.. Director Barbara Loeb is a mother with a master's degree in early childhood development and many years of teaching experience. She is the past president of the Greater New Orleans Association for Education of Young Children. The Children's Place, created in a residential area by the lake five years ago, is now so popular that even non-working mothers bring their children from as far away as Harahan.

Loeb's staff is hand-picked. The majority of the teachers have degrees in either education or early childhood education. Some are certified in dance and art, others are of the grandmotherly variety. "I set much higher standards for my center than the state requires," says Loeb, who carries a beeper when she is away from the center during business hours. "I couldn't keep the center going if I didn't make some profit, but I make less now than I did when I taught school. I am always a bit skeptical of the quality of care that centers give if they are able to generate a big profit."

Of course not all for-profit centers provide substandard care or make vast profits at the expense of the children and their needs.

There are many people throughout the city who genuinely enjoy working with children and are good at it. One such center is Vada's at 5127 Laurel St.. Vada Irving, a grandmother, opened her center in her beautifully maintained home in 1972 to serve the needs of the working parents in her Uptown neighborhood.

After taking a business course at the YMCA Irving decided to open Vada's and to turn her rapport with children into a business. Her center is licensed, and she proudly follows the requirements to the letter of the law. While she has no degrees in education, she has worked with the children in her church for years and also serves as a foster parent.

Another example of a different kind of for-profit center is The New Child Montessori at 3915 Perrier St.. This type of innovative learning/performing arts/child care facility is a recent addition to the options for local parents. Two of the owners are single parents and the other is a bachelor sympathetic to the plight of the working mother. Paulette Pugh, who serves as the Montessori director, studied the Montessori method in London and obtained her pre-primary degree at the Montessori World Education Institute in California. Mary Ann Melancon works with the performing arts part of the curriculum. She has

DONNA YOUNG

Vada Irving provides a grandmotherly atmosphere for day care children in her Laurel Street home.

studied both dance and theater in New York. The food for the center is catered by the Whole Food Company, and the children get only natural juices and spring water.

A third new option in New Orleans is the type of center that offers specialized services geared primarily to the handicapped or learning disabled child. The Center For Early Learning is applying for status as a non-profit educational institution. It is located at 4302 Canal St. in the Canal Street Presbyterian Church and has been open for less than a year. Its owners/directors Judy Martindale and Candy Everett have designed a program to provide individualized training for handicapped children. Martindale is a mother with a master's degree in special education. She is certified in early childhood development and speech pathology and also to teach emotionally disturbed and retarded children. She is the former coordinator of the Infant Education Program at the LSU Medical School. Everett has a master's degree in social work, a BA in child psychology and was affiliated with the Infant Education Program at LSU.

In spite of the number of for-profit centers, it has generally been the non-profit institutions, such as churches and universities, and corporations, that have been able to provide the best quality care by subsidizing the programs and/or by providing facilities and utilities free of charge.

Historically, churches in Louisiana and their affiliated day care facilities have provided top day care centers to the largest number of children. In New Orleans, the Methodist St. Mark's Community Center not only runs several quality day care programs but also acts as the primary training facility and information sevice for day care in the city.

There are also many excellent facilities run by the archdiocese.

In addition, local congregations from all different religions throughout the city have put together day care and mother's morning out programs.

One of the oldest church supported centers in the state and one of the few infant care facilities in the city is connected with the Sellers Home at 2010 Peniston St., a maternity home funded by the Southern Baptists. The home was founded in 1933. Coordinator of community services and day care director Janet Monroe is a mother with a master's degree in social work. "We began to take in community infants for day care because we already had a skilled staff who could provide the nurturing and stimulation that infants need," she says.

The Children's Place's Barbara Loeb plays basketball with her charges in the popular center, where even non-working mothers bring their children.

The New Orleans Baptist Theological Seminary's Preschool Education Center at 3939 Gentilly Blvd. is one of the model programs for the city. Program director Janet Kemp is a mother who holds master's degrees in religious and early childhood education as well as an undergraduate degree in psychology. She has been instrumental in helping a variety of other churches and schools get their day care programs started.

"Our program is set up so that parents can come and take their children out to lunch or play with them here during the day," says Kemp. "We have many qualified teachers, four who hold master's degrees, so that we can keep a teacher/child ratio of one to three for infants and one to five for toddlers. We have one hundred and twenty seminary children and will also accept children from the community."

Individual congregations of the United Methodist Church have created many fine centers. A spokesman for the local United Methodist district explains: "The people who belong to our churches are generally highly educated people who want quality care for their children. The various congregations do not open a center unless they are fully committed to provide the best."

The center at the First United Methodist Church at 3401 Canal St. was opened initially to fill the needs of the church's congregation. Says Director Mary Duhon, "In the beginning we had a beautiful facility and a highly qualified, well-paid staff but few children. Now, only two years later, our reputation has spread and we have seventy-five children and a waiting list of sixty. Our main components of success are low teacher-student ratios, a good program and lots of individualized attention."

The Tulane University Child Care Center opened in October 1980 to meet the needs of the university's faculty, staff and students. The response to the program from parents has been overwhelming. As one faculty parent puts it: "I keep my position at Tulane mainly so that my child is eligible for the center. I can't imagine a more wonderful environment."

Dr. Pat Schindler, the program's director, who has been instrumental in establishing high quality programs

all over the United States and who has 30 years of experience in early childhood development, explains, "Our program is developmental, with a strong emphasis given to providing each child with individual attention and gentle loving care. We have excellent teachers and keep the ratio of children to teachers low."

"I had some background in day care when I was at the Ford Foundation," says Tulane President Dr. Eamon Kelly. "In the future we would like to expand the facility and resources of the center as widely as possible to help other segments of the community. If we have a lot of interest from the responsible segments of the community it might be a possibility."

Though the university has spent vast sums of money to ensure that the program and staff are first rate, the facility is in the ground floor basement of a dorm. It is filled to capacity and has no space for many of the children on the waiting list.

Tulane's situation is common. Many of the best non-profit centers have large qualified staffs, top notch equipment, innovative programs and provide services on a sliding fee scale. The problem is that these centers generally operate in the red, which makes expansion impossible.

Specialists in the day care field say that the future of quality day care depends on the good non-profit programs' taking on satellite family day care homes and other centers that they can share resources with. The trained professional staffs of the "parent" center would instruct and oversee the directors of the satellite care facilities.

Paulette Pugh works with kids at the New Child Montessori school, an innovative learning/performing arts/child care facility. Food for this center is supplied by the Whole Food Company.

The other trend parents and professionals alike hope to see is more quality care for children provided by employers. A few local hospitals do this, as do some of the private schools, and some of the big oil companies are talking about doing it.

A coordinating program called Child Care Dallas, a non-profit organization in Dallas founded in 1899 to provide care for the children of working mothers, has received a $211,634 pilot grant from the United States Department of Health and Human Services to operate a two-year program. The group will set up family home care for children of employees of several Dallas firms. Charter members include Blue Cross-Blue Shield of Texas, RepublicBank and the Southland Corporation.

The program is seeking answers to four basic questions: Does quality day care decrease employee turnover? Does it decrease absenteeism? Does it increase productivity? Does it increase job satisfaction?

"The long range goal is to show the corporations that there is an enormous need for quality child care," says Madeline Mandell, executive director of Child Care Dallas. "We hope they will understand the issues involved and understand that people just can't go out there and find high quality child care." ●

Student teachers Sandra Clark and Mark Pinkerton think bunnies at the New Orleans Baptist Theological Seminary's Preschool Education Center, one of the model day care programs in the city.

Human Resources
NEWSLETTER

BONNIE DANIEL
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OF TEXAS
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AUG 01 1983
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Blue Cross and Blue Shield Association

Editor: Don Grant, Human Resources Research Consultant (312) 440-6494

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IN THIS ISSUE

Page No.

Alan Cain New MPS President 1
V. Tom New Director, Personnel at Blue Shield of California 1
"Family-Style" Day Care in Dallas 1
Plan Reps Preview TSST 1
Frank Fourmier Named Executive Director, Blue Shield of Puerto Rico 1
Columbus, Ga. Has P.R.I.D.E. 2
Executive Search Survey 2
Lehigh U. Site of July School of Marketing Session 2
Chief Human Resources Executives Conference 2
Health Care Coverage for Unemployed 2
'83 EEO Workshops Scheduled 3
EEOC Issues Older Worker Health Care Coverage Regulations 3
House Committee To Move On Pension Equity Bills 3
"Free" Life Insurance Cost 3
Pregnancy Coverage Decision 4
New AAP Debate Warming Up 4
Preventing Wrongful Discharge Claims 4
Discussions on OFCCP Rules Continue 4
Justice Department's AAP Devoid of Goals and Timetables 4
Justice Department Joins Back Pay Controversy 4

ALAN CAIN NEW MPS PRESIDENT

On June 11 the Montana Physicians Service Board of Trustees elected Mr. Alan F. Cain President of the Helena Plan. Mr. Cain formerly served as Vice President and General Counsel for MPS. Former President, Michael E. Donovan, was named Chairman of the Board in a concurrent action.

V. TOM NEW DIRECTOR, PERSONNEL AT BLUE SHIELD OF CALIFORNIA

Effective June 1, 1983, Victor R. Tom joined Blue Shield of California as Director, Personnel Administration. Prior to joining the Plan, he held personnel executive positions with Rockwell International and Security Pacific National Bank. Mr. Tom succeeds George Whitehead who has decided to take early retirement. Mr. Whitehead will continue serving the Plan in a consulting capacity during the next several months.

"FAMILY-STYLE" DAY CARE IN DALLAS

Blue Cross and Blue Shield of Texas is now offering employees an opportunity to provide "family-style" day care for their children. Sponsored by Child Care Dallas, a United Way agency, this pilot program "provides the same type of care that the child would receive in a home environment," explains Bonnie Dangel, Employment Manager and coordinator of the project. Licensed and trained caregivers are carefully screened and recruited from areas where the employee works, lives or other convenient locations he or she requests. Prior to enrollment in the program, each employee selects a caregiver based on his or her own needs, as well as those of their children. In order to provide the children, especially infants and toddlers, with the individual attention they require, caregivers are limited to four children each, including their own. This type of quality day care would ordinarily cost $75 or more per week, but through this program employees pay only $49/week. Employees have expressed high satisfaction with the quality of the program and appreciation to the Plan for this valued service. For more details, please contact Bonnie Dangel, Employment Manager, Blue Cross and Blue Shield of Texas (214) 669-6370, or see our checklist.

PLAN REPS PREVIEW TSST

On July 11-13, one hundred Plan representatives met in Chicago for an overview of Teleservicing Skills Training (TSST), the first customer service telephone training program designed exclusively for Blue Cross and Blue Shield Plans. Conducted by Plan trainers, TSST is comprised of eight modules to provide administration flexibility. The course provides customer service representatives with skills that will increase productivity, provide a higher level of service at no cost increase, retain enrollment, and enhance the acquisition of new business. Program quality and content exceeds any known "off-the-shelf" product. For details, contact Tony Narducci (312) 440-6490 at BCBSA or see our checklist.

FRANK FOURMIER NAMED EXECUTIVE DIRECTOR, BLUE SHIELD OF PUERTO RICO

On April 30 Mr. Juan Labadie Eurite retired after almost 12 years as Executive Director, Seguros De Servicio de Salud de Puerto Rico, Inc. (Hato Rey). The Plan's new Executive Director is Mr. Frank Fourmier, former Director of the Automobile Accident Compensation Administration, an agency of the Puerto Rican government. Mr. Fourmier has an undergraduate degree in business administration from the University of Puerto Rico and graduate degrees in finance from the Wharton School of Business and in law from the Inter American University of Puerto Rico.

DATA ORDER FORM

The following checklist is provided for your use in ordering additional information. Please check items of interest, complete the request form, and mail as directed.

ITEM		PAGE NO.
_____	1. "Family-Style" Day Care in Dallas	1
_____	2. Plan Reps Preview TSST	1
_____	3. Columbus, Ga. Has P.R.I.D.E.	2
_____	4. Health Care Coverage for Unemployed	2
_____	5. EEOC Issues Older Worker Health Care Coverage Regulations	3
_____	6. House Committee To Move On Pension Equity Bills	3
_____	7. "Free" Life Insurance Cost	3
_____	8. Pregnancy Coverage Decision	4
_____	9. New AAP Debate Warming Up	4
_____	10. Preventing Wrongful Discharge Claims	4
_____	11. Discussions on OFCCP Rules Continue	4
_____	12. Justice Department Joins Back Pay Controversy	4

Information Requested By:

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Mail Order Form To:

Don Grant, Human Resources Research Consultant, Blue Cross and Blue Shield Association, 676 N. St. Clair Street, Chicago, Illinois 60611.

Texas Child Care Quarterly

Take children outdoors to discover rocks

See page 36

Fall 1983

good news

Family day home system for corporate employees

Child Care Dallas, a United Way agency, is starting its second year of a federally funded grant to develop a family day home system for employees of local corporations.

The system, Corporate Initiative Child Care, is primarily for infants and toddlers because such care is scarce in Dallas and the nation. Also, quality center-based care, averaging $300 a month, is costly for parents.

"Our goal," says project manager Diana Range, "is to show corporations that home-based care is a cost-effective solution for an ever increasing employee problem."

Child Care Dallas, a nonprofit organization, was founded in 1899 to care for children of women working in Dallas cotton mills. Today it provides care for more than 780 children of low-income families through eight centers and 50 family day homes.

In October 1982 the agency received a two-year $211,654 grant from the U.S. Department of Health and Human Services to develop an innovative family day home system. The result is a model day home network that can be used in other corporate settings throughout the nation.

Participating corporations are RepublicBank, Blue Cross-Blue Shield, Southland Corporation, and the Dallas Times-Herald. These firms refer interested employees, including expectant parents and those on maternity leave, to Child Care Dallas. The agency's staff meets with employees to explore their needs and expectations for care.

Parents generally are in their 30s, have only one child, are employed in middle management positions, and have household incomes of $20,000 to $60,000 a year.

With employee preferences in mind, Child Care Dallas recruits women who want to care for children in their homes. Parents meet with CCD staff to discuss the selection of homes. Parents select the day home caregiver who will care for their children.

Parents pay $49 a week for each child. This fee includes meals and snacks but not baby formula or prepared baby food. Grant money is used to pay development and administrative costs and the initial expense of equipping homes with such items as cribs, high chairs, toys, fire extinguishers, and first aid kits.

Although infants and toddlers receive top priority for enrollment, homes will accept preschool siblings and children of other employees of the participating corporation as space is available.

The objective is to provide quality care for 125 children in approximately 36 homes. A day home is limited to four children (two children younger than 2 years and two older than 2), which includes the day mother's own children.

Child Care Dallas recruits homes through newspaper advertisements and articles, radio and television announcements, corporate newsletters, ex-employees, pediatricians, churches, parent-teacher organizations, and word-of-mouth.

"One goal of the project is to identify ways to recruit, screen, and train competent caregivers and to foster stability among them," says Range.

Caregivers have been recruited from Richardson, Dallas, Garland, Mesquite, Duncanville, and Plano.

Child Care Dallas interviews each applicant and screens her thoroughly. If accepted, the applicant undergoes 12 hours of orientation. During the year, a day mother is required to attend four half-day workshops on such topics as child development, nutrition, safety, and health. Every day home has an alternate caregiver if the primary caregiver becomes ill.

Child Care Dallas provides continuing support services for the program. In addition to training, the agency conducts monthly brown bag discussions with parents. It also offers guides for planning nutritious meals to caregivers.

Corporations can benefit from helping their employees with child care—less employee absenteeism,

(continued next page)

naswnews

National Association of Social Workers • Silver Spring, Maryland • Volume 29, Number 3 • March 1984

Day-Homes Help in Dallas

A CHILD-CARE AGENCY in Dallas, Texas, is testing the idea that a system of family day-homes can provide corporation employees with a cost-effective alternative to center-based care of their children during the work day.

Child Care Dallas is coordinating the day-home program, called Corporate Initiative Child Care, under a two-year, $212,000 grant from the HHS Administration for Children, Youth and Families that began in October 1982.

Employees of six corporations are referred by their employers to Child Care Dallas to arrange for the care of their young, or even not-yet-born, children. Space in the day-homes is now committed for 85 children; the grant allows for a maximum of 125. When the grant ends next September, the corporations will be asked to help support the program's operation.

The grant covers part of the program's administrative expenses and the cost of equipping the homes for day care. No more than four children, including the day-mother's, are allowed in each home. The $49 per week per child fee paid by parents covers meals except for more expensive items such as baby formula.

Homes are recruited in response to parents' needs. The homes and day-mothers, and the alternates the day-mothers designate, are screened by Child Care Dallas according to a 96-item list of standards in a process similar to an adoption-home study. NASW member Sharon Fink is a family day-home specialist assigned to the program.

Although Texas has voluntary registration for day-homes, the state has given the agency authority to approve and monitor homes for the Corporate Initiative program.

Final statistics will not be compiled until the grant expires, but it appears that the program may show that the availability of quality day-home care has a beneficial effect on employees' job performance and absenteeism and job-turnover rates. □

"DEVELOPING AN EMPLOYER-ASSISTED FAMILY DAY HOME SYSTEM"

In 1982, Child Care Dallas was awarded a grant from the Administration on Children, Youth and Families, U.S. Department of Health and Human Services, to develop a family day home system to serve employees of six corporations. The agency's experiences in this venture form the basis of a practical guidebook for corporations, child care providers, social service agencies and others who believe in the potential of day homes as a corporate child care option.

"DEVELOPING AN EMPLOYER-ASSISTED FAMILY DAY HOME SYSTEM" includes discussion of:

* why family day care is an appropriate option for employers to support
* how to determine whether the concept is viable in one's own community
* how to secure corporate participation in the system
* effective strategies for recruiting and selecting caregivers
* ways of assuring and maintaining the delivery of quality child care in the system
* parent-system relationships--from the introduction of the system inside the corporation through utilization of the homes

"DEVELOPING AN EMPLOYER-ASSISTED FAMILY DAY HOME SYSTEM" has been produced in a notebook format and includes samples of job descriptions, caregiver assessments, system procedures, and many other materials.

Copies are $16.95 and may be ordered using the attached form.

Please send me ___ copies of "DEVELOPING AN EMPLOYER-ASSISTED FAMILY DAY HOME SYSTEM"

Name _____

Organization _____

Street _____

City _____ State _____ Zip _____

Telephone (_____) _____

Amount Enclosed $ _____ (includes postage and handling).

(Texas residents add $1.23 sales tax.)